FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1990	
DOCUMENT	-#

P94000032392 (0)

WILSON HEIGHTS DEVELOPMENT, INC.

Principal Place of Business
1655 W. 39TH PLACE

Mailing Address

1655 W. 39TH PLACE HIALEAH FL 33012



HALEAH FL 33012				HIALEAH FL 33012							
								3. Date Incorporated or Qualified 04/25/1994	3a. Date	of Last Re 4/04/19	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			Applied For
L	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						Place	65-0494458		1	Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & State				City & State			6. Election Campaign Financing		\$5.0	May Be	
23 Hiale	ah, F	lorida		28 Hialeah, Florida			Trust Fund Contribution	LJ		to Fees	
Zip		Country		Zip	Countr	У		8. This corporation has liability for i	ntangible tax	under s	199.032,
24 33012	-7014	25 USA		29 33012-7014	30 U.	S	A		СМ		
	9, Name	and Address	of Current F	Registered Agent		Т		10. Name and Address of New R	egistered A	gent	
					81	1	Name				- 1
1	BIRNBAU	-			82	:†	Street Addres	ss (P.O. Box Number is Not Acceptab	le)		
	BISCAYN	e blvd.							-		
SUITE					83	1					-
MIAMI	FL 33180				84	†	City		FL	85 Zip	Code
11. Pursuant t	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office										
l or register	ed agent, oi	r both, in the Sta	ite of Florida.	. Such change was authorized n 607.0505, Florida Statutes.	by the con	Ю	ration's board	of directors. Thereby accept the appoint	óintment as i	egistered	agent. I am
	.,	pre and doingston	ic e1, e301101	1037.0000, 1101100 01110100.							
SIGNATURE _	Signature, typed	for printed frame of re	gistered agent and	d title if applicable (NOTE:	Registered Agr	nt :	signature required i	when reinstating)	DATE		
12.		OFFI	CERS AND D	DIFIECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	R\$ IN 12
TITLE	D			☐ DELETE	1. 1 TITLE] Change	☐ Addition
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CITY-ST-ZIP		EAH FL 33012	<u> </u>		1.4 CITY -	ST-	- 2IP				
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/86 3043624512 Date Dayone Phone # CR2E034 (12/95