FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P94000046995 (4)

FILED Mar 25 1998 8:00am Secretary of State

WEIIZI	EN AT HANNONT LAKES, IN									
Principal Place of Business Mailing Address						i idulibu ili ialii minii aniii ndiii ga	40) ABIN AININ HIIIN		Of Alti soot	
5901 N.W. 15	STREET	P.O. BOX 4550	.O. BOX 4550							
SUITE 120) P1 BAB14	SUITE 120				DO NOT WRITE	IN THIS SPAC	F		
MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
03		00				06/23/1994			-	
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Apr	plied For	
21	26					65-0527163	ſ		Applicable	
Suite, Apt. #, etc. Suite, Apl. #, etc.				· · · · · · · · · · · · · · · · · · ·			\$E		dditional	
22	27					5. Certificate of Status Desired		Fee Red	quired	
City & State City & State						6. Election Campaign Financing	\$	5.00	May Be	
23 28						Trust Fund Contribution		dded to		
Zip	Country	Zip	Zip Country			This corporation owes or has paid the current year Intangible				
24	25		30			Personal Property Tax due June			No	
	g. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agent	[
WE	eitzer, harry		l'	Name	8				ĺ	
5901 N.W. 151 STREET, SUITE#120				2 Stree	t Addres	s (P.O. Box Number is Not Acceptab	le)			
MIAMI LAKES FL 33014										
				33					1	
			l la	4 City			85	Zip C	Code	
								<u> </u>		
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, yield or printed name of registered agent and title if applicable (NOTE: Registered Agent agent agent when reinstating) DATE										
12.	OFFICERS AND		13.	·		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	CTOR	S IN 12	
TITLE	PD	DELETE	1.1 TITL	E	AVS				XX Addition	
NAME	WIETZER, HARRY 12N			!E		NSTON, PATRICE M.				
STREET ADORESS	5901 NW 151 STREET, SUITE	120	1.3 STR	EET ADDRESS		1 N.W. 151st STREET,	<i>,</i> #120		13	
CITY-ST-ZIP	MIAMI LAKES FL		1.4 CIT	- ST - ZIP		MI LAKES, FL 33014			13	
TITLE	VPTS	DELETE	2.1 TITL	E	VPD		3/28 C	hange	Addition	
NAME	KLEINERMAN, PETER		2.2 NAM	IE .		INERMAN, PETER			ì	
STREET ADDRESS	5901 NW 151 STREET, SUITE	120	2.3 STR	EET ADDRESS		1 N.W. 151st STREET	, #120			
CITY-ST-ZIP	MIAMI LAKES FL		2. 4 CIT	Y - ST - ZIP		MI LAKES, FL 33014			1	
TITLE			3.1 TITE	E			□ C	hange	Addition	
NAME	ROSEWATER, JAMES		3.2 NAM	tE .]	
STREET ADDRESS	5901 NW 151 STREET, SUITE	120	3.3 STR	ET ADDRESS	; [-	
CITY-ST-ZIP	MIAMI LAKES FL		3.4. CIT	Y-ST-ZIP						
TITLE	VP	DELETE	4.1 TITL		1		C	hange	Addition	
NAME	FELDSTEEN, LEIGH		4. 2 NA	ИE]				Ì	
STREET ADDRESS	5901 NW 151 STREET, SUITE	120	4.3 STR	EET ADDRESS	;				į	
CITY-ST-ZIP	MIAMI LAKES FL			- \$T - ZIP						
TITLE	VPS	DELETE	5.1 TITL		VPD)	3 53 C	hange	Addition	
NAME	SPEIZER, HARRY		5.2 NAM	IE	1 '	IZER, HARRY			1	
STREET ADDRESS	5901 NW 151 STREET, SUITE	120		EET ADDRESS		1 N.W. 151st STREET	, #120		ĺ	
CITY-ST-ZIP	MIAMI LAKES FL			-ST-ZIP		MI LAKES, FL 33014				
TITLE	CC	DELETE	6.1 TITL		VPI		c	hange	XX Addition	
NAME	HART, TIMOTHY S	***	6.2 NAA			ER, EDWARD W.			1	
STREET ADDRESS	5901 NW. 151 STREET, SUITE	120	1	= Eet address		1 N.W. 151st STREET	, #120		1	
CITY-ST-ZIP	MIAMI LAKES FL			- ST- ZIP		MI LAKES, FL 33014				
14. I hereby c	ertify that the information supplied with	this filing does not qualify for	the exer	nption sta	ted in Se	ection 119.07(3)(i), Florida Statutes. I	further certify th	nat the i	information	

supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an on the report of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a production of the report with an address.

Asst. Vice Pres. / Secy.

3/20/98

305-819-4663