

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90083 017 ***150.00

DOCUMENT # P94000047525

1. Corporation Name

WEITZER HOMEBUILDERS INCORPORATED

Principal Place of Business
14505 COMMERCE WAY
#400
MIAMI LAKES, FL
33016

Mailing Address
14505 COMMERCE WAY
#400
MIAMI LAKES, FL
33016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

6/24/94

4. FEI Number

65-0502494

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEITZER, HARRY
5901 NW 151ST STREET, #120
MIAMI LAKES, FL 33014

81 Name

PATRICE M. JOHNSTON

82

Street Address (P.O. Box Number is Not Acceptable)

14505 COMMERCE WAY

83 #400

84 City

MIAMI LAKES

FL

85 Zip Code

33016

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 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, typed or printed name of registered agent and title if applicable.

PATRICE M. JOHNSTON

4/2/99

DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD/President, HARRY WEITZER, HARRY	1.1 TITLE	D
NAME	WEITZER, HARRY	1.2 NAME	LITT, ALAN G.
STREET ADDRESS	14505 COMMERCE WAY, #400	1.3 STREET ADDRESS	405 CEDAR LANE
CITY-ST-ZIP	MIAMI LAKES, FL 33016	1.4 CITY-ST-ZIP	TEANECK, NJ 07666
TITLE	D	2.1 TITLE	VICE
NAME	HELLRING, LAWRENCE	2.2 NAME	RICE, SHERYL S.
STREET ADDRESS	9875 N.W. 79TH AVENUE	2.3 STREET ADDRESS	14505 COMMERCE WAY, #400
CITY-ST-ZIP	HIALEAH GARDENS, FL 33016	2.4 CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	D	3.1 TITLE	S
NAME	AMBROSIO, MICHAEL	3.2 NAME	JOHNSTON, PATRICE M.
STREET ADDRESS	11900 BISCAYNE BOULEVARD, #801	3.3 STREET ADDRESS	14505 COMMERCE WAY, #400
CITY-ST-ZIP	MIAMI, FL 33181	3.4 CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	EVP	4.1 TITLE	
NAME	KLEINERMAN, PETER	4.2 NAME	
STREET ADDRESS	5901 NW 151st STREET, #120	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES, FL 33014	4.4 CITY-ST-ZIP	
TITLE	SVP	5.1 TITLE	
NAME	SPEIZER, HARRY	5.2 NAME	
STREET ADDRESS	5901 NW 151st STREET, #120	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES, FL 33014	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 legal 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICE M. JOHNSTON

4/2/99

Date

305 819 4663

Daytime Phone #

CR2E034 (11/98)