

3-25-98 B-3706C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000054509 (2)

1. Corporation Name

WEITZER SERENA LAKES TOWNHOMES, INC.

Principal Place of Business

5901 NW 151 STREET
SUITE 120
MIAMI LAKES FL 33014
US

Mailing Address

P.O. BOX 4550
SUITE 120
MIAMI LAKES FL 33014
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1994

4. FEI Number

65-0505790

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WEITZER, HARRY	
STREET ADDRESS	5901 NW 151ST STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

TITLE	VPT	<input type="checkbox"/> DELETE
NAME	KLEINERMAN, PETER	
STREET ADDRESS	5901 NW 151ST STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

TITLE	VP	<input type="checkbox"/> DELETE
NAME	ROSEWATER, JAMES P	
STREET ADDRESS	5901 NW 151 STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

TITLE	VP	<input type="checkbox"/> DELETE
NAME	FELDSTEEN, LEIGH	
STREET ADDRESS	5901 NW 151 STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

TITLE	VPS	<input type="checkbox"/> DELETE
NAME	SPEIZER, HARRY	
STREET ADDRESS	5901 NW 151 STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

TITLE	CC	<input checked="" type="checkbox"/> DELETE
NAME	HART, TIMOTHY S	
STREET ADDRESS	5901 NW 151 STREET, SUITE 120	
CITY-ST-ZIP	MIAMI LAKES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	AVPS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JOHNSTON, PATRICE M.	
1.3 STREET ADDRESS	5901 N.W. 151st STREET, #120	
1.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014	

2.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KLEINERMAN, PETER	
2.3 STREET ADDRESS	5901 N.W. 151st STREET, #120	
2.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	SPEIZER, HARRY	
5.3 STREET ADDRESS	5901 N.W. 151st STREET, #120	
5.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014	

6.1 TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	DWIER, EDWARD W.	
6.3 STREET ADDRESS	5901 N.W. 151st STREET, #120	
6.4 CITY-ST-ZIP	MIAMI LAKES, FL 33014	

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 in an attachment with an address.

SIGNATURE:

Asst. Vice Pres./Secy. 3/20/98 305-819-4663

CR2E034 (10/97)