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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## P94000057206 (2) DOCUMENT #

THE HOMES REVIEW OF SOUTH FLORIDA, INC.					
Principal Place o	of Business	Mailing Address			F SERVICON THE COURT DIGIT DOUR SOUR BOUND BOYER DIGIT DOUB IN AN IN BUT OF BEH TOOL
12773 FOREST WELLINGTON	FHILL BLVD #101 FL 33414	12773 FOREST HILL BLVI WELLINGTON FL 33414	D., #101		
					3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995
2. Principa! Plac	ce of Business	2a. Mailing Address			4. FEI Number Applied For 65-0507158 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Search Fee Required
City & State		Cily & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country 30	(	<ol> <li>This corporation has liability for intangible tax under s 199.032,</li> <li>Florida Statutes  Yes  □ No</li> </ol>
24	25 g. Name and Address of Curre		301		10. Name and Address of New Registered Agent
	e, .sum was realised of cult		81	Name	
PAULL, RICHARD J			82	Street A	Address (P.O. Box Number is Not Acceptable)
	OREST HILL BLVD., #1302		83	-	
WELLING	iton FL 33414		84	City	FL 85 Zip Code
44.5	10-10-10-10-10-10-10-10-10-10-10-10-10-1	2 and 607 1509 Horida Statutes	the above	panied co	organized submits the statement for the nurrose of changing its registered office
or registere familiar with	of the provisions of deciding consistent and agent, or both, in the State of Flor and accept the obligations of, Sec	rida. Such change was authorized	by the con	noration's	board of directors. Thereby accept the appointment as registered agent. I am
SIGNATURE	Signative typed or profed have of redefered age			out sepulative re	INDUSTRIBUTIONS OF THE PROPERTY OF THE PROPERT
12.		ND DIRECTORS  DELETE	13.		ADD/HONS/CHANGES TO OFFICERS AND DIALECTORS IN 12
TITLE	D	[] betele	1.2 NAME		
NAME CERTE LOGRESS	FISHMAN, MARC J 1191-A SUMMIT PLACE CIR	r∩ E		T ADDRESS	
STREET ADDRESS	WEST PALM BEACH FL 334		1.4 City		
CITY-ST-ZIP TITLE	D	DETE	2 1 11111		Change Addition
NAME	STEINHORN, JOYCE		2.2 NAME		
STREET ADDRESS	1021 CHERRY LANE		2 3 STRE	T ADDRESS	
CITY-ST-ZIP	WELLINGTON FL 33414		2.4 CITY - ST - ZIP		
TITLE		☐ DELETE 3		-	Change Addition
NAME			3 2 NAM1		
STREET ADDRESS				EF ADDRESS	
CITY-ST-ZIP		☐ DELETE	3.4 CHY 4.1 TITL		☐ Change ☐ Addition
TITLE		□ orrere	4 2 NAM		
NAME PERFET ADDRESS				FT ADDRESS	
STREET ADDRESS CHTY-ST-ZIP			44 CiTY		
TITLE		☐ DELETE	5 1 1111		Change Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5 3 S1RE	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	- ST - ZIP	
TITLE			6 1 TITU		Change Add-tion
NAME			6 2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIF	<u> </u>	of the 45 or Edward in small make with A small	and and de	- S1 - ZIP	ualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further
certify that oath; that appears in	by certify that the information supplied to the information indicated on this ar I am an officer or director, of the gor Block 12 or Block 13 it changes.	or win this liming is voluntarily under houal report or supplemental annu- poration or the receiver or trustee on an attachment with an addre	ia report is empowere ess.	d to execu	accurate and that my signature shall have the same legal effect as if made under ute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

IGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)