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FILED
May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000010145 (7)

1. Corporation Name

LOWELL AT COCO LAKES, INC.



Principal Place of Business

Mailing Address

% KATHERINE NOLTING
1451 SOUTH MIAMI AVE.
MIAMI FL 33130

% KATHERINE NOLTING
1451 SOUTH MIAMI AVE.
MIAMI FL 33130-4318

3. Date Incorporated or Qualified

02/07/1995

3a. Date of Last Report

04/30/1996

2. Principal Place of Business

2a. Mailing Address

21 80TH SOUTHWEST 8TH ST

26 80TH SOUTHWEST 8TH ST

4. FEI Number

APPLIED FOR 65-0559919

Applied For

Not Applicable

22 1870

27 SUITE 1870

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

23 MIAMI FL

28 MIAMI FL

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

24 33130

29 33130

8. This corporation has liability for intangible tax under s 199 032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAHN, S. LAWRENCE III
1451 SOUTH MIAMI AVE.
MIAMI FL 33130

81 Name

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

80TH SOUTHWEST 8TH STREET

83

SUITE 1870

84

MIAMI

FL

85 Zip Code

33130

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 607.0605, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME KAHN, S. LAWRENCE III
STREET ADDRESS 1451 SOUTH MIAMI AVE.
CITY-ST-ZIP MIAMI FL 33130

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME KAHN, S. LAWRENCE III
1.3 STREET ADDRESS 80TH SOUTHWEST 8TH ST - STE 1870
1.4 CITY-ST-ZIP MIAMI FL 33130

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME

2.2 NAME HEARNE, ALAN

STREET ADDRESS

2.3 STREET ADDRESS 80TH SOUTHWEST 8TH STREET STE 1870

CITY-ST-ZIP

2.4 CITY-ST-ZIP MIAMI FL 33130

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY-ST-ZIP

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-ST-ZIP

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. I do 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

(305) 577-8550

Date

Daytime Phone #

CR2E034 (9/96)