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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000036978 (1) DOCUMENT #

WEITZER AT DEERFIELD BEACH. INC.

Principal Place of Business Mailing Address **S HARRY WEITZER** * HARRY WEITZER 5901 N.W. 151 STREET. SUITE 120 5901 N.W. 151 STREET. SUITE 120 MIAMI FL 33014 MIAMI FL 33014

FILED Mar 25 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0579192 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zφ 8. This corporation owes or has paid the current year Intangible 24 ▼ Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WEITZER, HARRY 5901 N.W. 151 STREET R2 Street Address (P.O. Box Number is Not Acceptable) SUITE 120 R.3 **MIAMI FL 33014** Zip Code 85 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, typed or printed name of registered agent and little if applicable (NOTE: Flogistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change AVS WEITZER, HARRY NAME 1.2 NAME JOHNSTON, PATRICE M.

STREET ADDRESS 5901 N.W. 151 STREET, SUITE 120 13 STREET ADDRESS 5901 N.W. 151ST STREET, #120 MIAMI LAKES FL 33014 CITY-ST-ZIP 1.4 CITY-ST-ZIP MIAMI LAKES, FL 33014 DELETE TITLE 2.1 TITLE NAME 2.2 NAME KLEINERMAN, PETER STREET ADDRESS 2.3 STREET ADDRESS 5901 N.W. 151st STREET, #120 MIAMI LAKES, FL 33014 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE SPEIZER, HARRY NAME 3.2 NAME 5901 N.W. 151st STREET, #120 STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES, FL 33014 3 4. CiTY-ST-ZiP CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change X Addition NAME 4 2 NAME ROSEWATER, JAMES P. STREET ADDRESS 4.3 STREET ADDRESS 5901 N.W. 151st STREET, #120 CITY - ST - ZIP 4.4 CiTY+ST-ZIP MIAMI LAKES, FL 33014 DELETE X Addition TITLE 5.1 TITLE NAME 5.2 NAME FELDSTEEN, LEIGH STREET ADDRESS 5.3 STREET ADDRESS |5901 N.W. 151st STREET, #120 CITY-ST-ZIP 5.4 CITY-ST-ZIP MIAMI LAKES, FL 33014 DELETE Addition TITLE 6.1 TITLE DWIER, EDWARD W. NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 5901 N.W. 151st STREET, #120

14. 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 suppliemental 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 hustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

SIGNATURE