

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 30, 1999 8:00 am
Secretary of State

04-30-1999 90087 038 ***150.00

DOCUMENT # P97000026884

1. Corporation Name

SILVER LAKES REAL ESTATE GROUP, INC.

Principal Place of Business

1 SE 3RD AVE., STE. 960.
MIAMI FL 33131

Mailing Address

1 SE 3RD AVE., STE. 960
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/25/1997

4. FEI Number

65-0759866

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

21 6600 COWPEN RD.

Suite, Apt. #, etc.

22 #300

City & State

23 MIAMI LAKES, FLA

Zip

24 33014

Country

25 USA

2a. Mailing Address

26 6600 COWPEN RD.

Suite, Apt. #, etc.

27 #300

City & State

28 MIAMI LAKES, FLA

Zip

29 33014

Country

30 USA

9. Name and Address of Current Registered Agent

ROZENCWAG, LESLIE A
1 SE 3RD AVE., STE. 960
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

LESLIE ALAN ROZENCWAG, ESQ.

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 ☐ DELETE

P
WONG, ANTONIO H.
6600 COWPEN ROAD, SUITE 300
MIAMI LAKES FL 33014

TITLE ☐ DELETE

VP
ORCASHANG, JOSE A. M
6600 COWPEN ROAD, SUITE 300
MIAMI LAKES FL 33014

TITLE ☐ DELETE

S
HUI, HAROLD D
6600 COWPEN ROAD, SUITE 300
MIAMI LAKES FL 33014

TITLE ☐ DELETE

T
PLAZA, JUAN CASTILLO M
6600 COWPEN ROAD, SUITE 300
MIAMI LAKES FL 33014

TITLE ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME DIRECTOR / P

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME DIRECTOR / VP

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME DIRECTOR / S

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☒ Addition

4.2 NAME DIRECTOR / T.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME DIRECTOR

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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

Date

Daytime Phone #

CR2E034 (11/98)