

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

DOCUMENT # V58659

1. Corporation Name

Weitzer Lago Mar Homes, Inc.

Principal Place of Business

5901 NW 151 Street
Suite 120
Miami Lakes, FL 33014

Mailing Address

-same-

2. Principal Place of Business

21 same as above

2a. Mailing Address

26 same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

Brafman, Howard
7900 Miami Lakes Drive West
Miami Lakes, FL 33014

3. Date Incorporated or Qualified

8/19/92

3a. Date of Last Report

5/01/95

4. FEI Number

65-0351089

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name
Weitzer, Harry

82 Street Address (P.O. Box Number is Not Acceptable)
5901 NW 151 Street

83 Suite 120

84 City
Miami Lakes

FL

85

Zip Code
33014

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 607.0508, Florida Statutes.

SIGNATURE

3/22/96

12. OFFICERS AND DIRECTORS

TITLE CDP ☒ DELETE
NAME Kislak, Jay I.
STREET ADDRESS 7900 Miami Lakes Drive West
CITY-ST-ZIP Miami Lakes, Florida 33014

TITLE DVS ☒ DELETE
NAME Brafman, Howard
STREET ADDRESS 7900 Miami Lakes Drive West
CITY-ST-ZIP Miami Lakes, FL 33014

TITLE VCFO ☒ DELETE
NAME Gross, James P.
STREET ADDRESS 7900 Miami Lakes Drive West
CITY-ST-ZIP Miami Lakes, FL 33014

TITLE T ☒ DELETE
NAME Fleischman, David H.
STREET ADDRESS 7900 Miami Lakes Drive West
CITY-ST-ZIP Miami Lakes, FL 33014

TITLE C ☒ DELETE
NAME Otto, Debra C.
STREET ADDRESS 7900 Miami Lakes Drive West
CITY-ST-ZIP Miami Lakes, FL 33014

TITLE VAS ☒ DELETE
NAME Macqueen, James H.
STREET ADDRESS 7900 Miami Lakes Dr. West
CITY-ST-ZIP Miami Lakes, FL 33014

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME Weitzer, Harry
1.3 STREET ADDRESS 5901 NW 151 Street
1.4 CITY-ST-ZIP Miami Lakes, FL 33014

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

3/22/96 (305) 819-4663

CR2E034 (12/95)