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Secretary of State



PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # M43216 (4)  
1. Corporation Name  
WEBSTER GRANT LAND COMPANY



Principal Place of Business: 5901 NW 151 STREET SUITE 120 MIAMI LAKES FL 33014 US  
Mailing Address: 5901 NW 151 STREET SUITE 120 MIAMI LAKES FL 33014-2428 US

3. Date Incorporated or Qualified: 12/15/1986  
3a. Date of Last Report: 03/29/1996  
4. FEI Number: 59-2780295  
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

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25  
2a. Mailing Address: 26 P.O. Box 4550 27 Suite, Apt. #, etc. 28 Miami Lakes, Florida 29 Zip: 30 USA

9. Name and Address of Current Registered Agent  
WEITZER, HARRY  
5901 NW 151 STREET, SUITE 120  
MIAMI LAKES, FLORIDA 33014  
MIAMI FL 33155

10. Name and Address of New Registered Agent  
81 Name  
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 re-stating) (DATE)

12. OFFICERS AND DIRECTORS			
TITLE	DP	<input type="checkbox"/> DELETE	
NAME	WEITZER, HARRY		
STREET ADDRESS	4960 SW 72 AVE #401		
CITY-ST-ZIP	MIAMI FL		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	<del>V.P., Treasurer, Asst. Secy.</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
1.2 NAME	<del>Peter Kleinerman</del>		
1.3 STREET ADDRESS	<del>5901 NW 151 Street, Suite 120</del>		
1.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		
2.1 TITLE	<del>Vice President</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
2.2 NAME	<del>James Rosewater</del>		
2.3 STREET ADDRESS	<del>5901 NW 151 Street, Suite 120</del>		
2.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		
3.1 TITLE	<del>Vice President</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
3.2 NAME	<del>Laird Feldstein</del>		
3.3 STREET ADDRESS	<del>5901 NW 151 Street, Suite 120</del>		
3.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		
4.1 TITLE	<del>Vice President, Secy.</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
4.2 NAME	<del>Harry Spalzer</del>		
4.3 STREET ADDRESS	<del>5901 NW 151 Street, Suite 120</del>		
4.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		
5.1 TITLE	<del>Corporate Controller</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
5.2 NAME	<del>Timothy S. Hart</del>		
5.3 STREET ADDRESS	<del>5901 NW 151 Street, Suite 120</del>		
5.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		
6.1 TITLE	<del>AVP</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
6.2 NAME	<del>Patrice M. Johnston</del>		
6.3 STREET ADDRESS	<del>5901 N.W. 151st Street, #120</del>		
6.4 CITY-ST-ZIP	<del>Miami Lakes, FL 33014</del>		

14. I do hereby certify that the information supplied with this report 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: HARRY WEITZER, D/P 4/24/97 305-819-4663

CRE034 (9/96)