

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 18 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000000713 (6)

1. Corporation Name

WESTFIELD SERVICES, INC.



Principal Place of Business 11601 WILSHIRE BLVD 12TH FLOOR LOS ANGELES CA 90025 US	Mailing Address 11601 WILSHIRE BLVD 12TH FLOOR LOS ANGELES CA 90025-1770 US
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 02/10/1995	3a. Date of Last Report 03/08/1996
4. FEI Number 95-4497934	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
NATIONAL CORPORATE RESEARCH, LTD., INC. 1406 HAYS STREET - SUITE #2 TALLAHASSEE FL 32301	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
	85 Zip Code

10. Name and Address of New Registered Agent	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature (typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	DP <input type="checkbox"/> DELETE
NAME	GREEN, RICHARD E
STREET ADDRESS	11601 WILSHIRE BLVD 12TH FLOOR
CITY - ST - ZIP	LOS ANGELES CA
TITLE	DV <input type="checkbox"/> DELETE
NAME	LOWY, PETER S
STREET ADDRESS	11601 WILSHIRE BLVD 12TH FLOOR
CITY - ST - ZIP	LOS ANGELES CA
TITLE	S <input type="checkbox"/> DELETE
NAME	BERMINGHAM, ROBERT P
STREET ADDRESS	11601 WILSHIRE BLVD 12TH FLOOR
CITY - ST - ZIP	LOS ANGELES CA
TITLE	T <input type="checkbox"/> DELETE
NAME	STEFANEK, MARK
STREET ADDRESS	11601 WILSHIRE BLVD 12TH FLOOR
CITY - ST - ZIP	LOS ANGELES CA
TITLE	D <input type="checkbox"/> DELETE
NAME	LOWY, FRANK
STREET ADDRESS	11601 WILSHIRE BLVD 12TH FLOOR
CITY - ST - ZIP	LOS ANGELES CA
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: *Robert P. Bermingham* Robert P. Bermingham 2/4/97 310 445-2427

CR2E034 (9/96)