

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028454

FILED
Apr 07, 2012
Secretary of State

Entity Name: WEST PALM ENTERPRISES, INC.

Current Principal Place of Business:

2505 NORTH DIXIE HIGHWAY
THE HARBOR SHOPPING CENTER
LAKE WORTH, FL 33460

New Principal Place of Business:

2505 NORTH DIXIE HIGHWAY
THE HARBOR SHOPPING CENTER
LAKE WORTH, FL 33460 UN

Current Mailing Address:

9688 SW 24TH STREET
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-0995226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF MACHADO & HERRAN, P.A.
8500 S.W. 8TH STREET
SUITE 238
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: COB
Name: HERRAN, MANUEL A
Address: 8460 SW 5 STREET
City-St-Zip: MIAMI, FL 33144

Title: DVP
Name: HERRAN, JOSE A
Address: 8455 GRAND CANAL DRIVE
City-St-Zip: MIAMI, FL 33144

Title: DT
Name: HERRAN, EZEQUIEL
Address: 14020 SW 36 STREET
City-St-Zip: MIAMI, FL 33175

Title: DS
Name: VALDES, DANIEL R
Address: 9688 CORAL WAY
City-St-Zip: MIAMI, FL 33165

Title: DAS
Name: HERRAN, JOSE A JR
Address: 4911 BILTMORE DRIVE
City-St-Zip: CORAL GABLES, FL 33146

Title: PD
Name: HERRAN, AGUSTIN
Address: 9688 SW 24 STREET
City-St-Zip: MIAMI, FL 33165 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: AGUSTIN HERRAN

P

04/07/2012

Electronic Signature of Signing Officer or Director

_____ Date