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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000024165 (1)

WESTLAND SEPTIC TANK, CORPORATION

Principal Place of Business Mailing Address 175 FONTAINEBLEAU BLVD 12002 S.W. 4TH TERRACE SUITE 1R14 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE MIAMI FL 33172 3. Date Incorporated or Qualified US 03/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable 65-0413449 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 25 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROJAS, JUAN 12002 S.W. 4TH TERRACE 82 MIAMI FL 33184 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, I lorida Statutes. **SIGNATURE** Signature, typed or printed manic of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ___ Addition TITLE 1.1 TITLE PD ROJAS, JUAN NAME 1.2 NAME 12002 S.W. 4TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33184 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1.1ITLE Addition ROJAS, AIDA 2.2 NAME 12002 S.W. 4TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33184** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Addition TITLE 3.1 DILE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Channe Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - 7/P CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

14. Thereby 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 treated 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 trusted endowered 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 attechment with any address.

FILED

May 18 1998 8:00am

Secretary of State