

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 666934

**Entity Name:** SEL WEST COAST, INC.

**Current Principal Place of Business:**

7005 14TH. AVE.  
TAMPA, FL 33619

**FILED**  
**Feb 24, 2015**  
**Secretary of State**  
**CC8951307871**

**Current Mailing Address:**

PO BOX 75301  
TAMPA, FL 33675

**FEI Number: 59-2004308**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LEVANT, LEE A.  
7005 14TH. AVE.  
TAMPA, FL 33619 US

*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

**Officer/Director Detail :**

Title	P	Title	ST
Name	LEVANT, LEE A	Name	LEVANT, RUTH
Address	7005 14TH. AVE.	Address	7005 14TH. AVE.
City-State-Zip:	TAMPA FL 33619	City-State-Zip:	TAMPA FL 33619

*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: LEE LEVANT**

**MANAGER**

**02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date