

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

FILED

Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 258781

(4)

1. Corporation Name
WESTBROOK MOTORS INC

Principal Place of Business

1759 PALM AVENUE
HIALEAH FL 33010

Mailing Address

1759 PALM AVENUE
HIALEAH FL 33010-2648



3. Date Incorporated or Qualified

05/08/1962

3a. Date of Last Report

02/27/1996

4. FEI Number

59-0968342

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

STARKWEATHER, HAROLD C
77 PALMETTO DR
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name
EDWARD BERGHOLM JR.
82 Street Address (P.O. Box Number is Not Acceptable)
1341 SW FIRST STREET
83
84 City
MIAMI FL 85 Zip Code
33136

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 *Edward Bergholm Jr.* EDWARD BERGHOLM JR. 01-10-97
Signature, typed or printed name of registered agent and file, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	EWING, BETTY R	
STREET ADDRESS	210 EAST 19TH ST	
CITY - ST - ZIP	HIALEAH, FL 33010	
TITLE	ST	DELETE
NAME	WESTBROOK, EUGENE W	
STREET ADDRESS	8560 NW 176TH. ST.	
CITY - ST - ZIP	MIAMI FL 33015	
TITLE	VP	DELETE
NAME	WESTBROOK, EDWARD	
STREET ADDRESS	214 WEST 19TH STREET	
CITY - ST - ZIP	HIALEAH, FL 33010	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		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: *Betty R. Ewing - pres.* BETTY R. EWING - PRESIDENT. 01-10-97 (305) 888-1474.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)