## **PROFIT** CORPORATION



## FLORIDA DEPARTMENT OF STATE

## Mathadua Harria

## FILED Apr 08, 1999 8:00 am Secretary of State

ANNUAL REPORT 1999		Secretary of State DIVISION OF CORPORATIONS		04-08-1999 90106 013 ***150.00
DOCUI	MENT # 469085			
WEST END SUNDRIES, INC.				
Principal Place	e of Business	Mailing Address		
2565 WEST GATE AVENUE 2565 WEST GATE AVENUE				
WEST PALM BEACH FL 33409-5077 WEST PALM BEACH FL 33409-50				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
		La Maisira Addresa		02/06/1975 4 FEI Number Applied For
2. Principal Place of Business		2a. Mailing Address		59-1579820 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
22	<u></u>	27		Pee Required
City & State		City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip			Country	8. This corporation owes the current year Intangible
24 25 29 30			<del></del>	Personal Property Tax.
<del></del>	g. Name and Address of Current	Registered Agent	B1 Name	10, Natile dita Address of New Regustered Agent
CANNON, EVELYN J.				Address (P.O. Box Number is Not Acceptable)
	WEST GATE AVENUE		82 Street	Address (P.O. Box Number is Not Acceptable)
WEST PALM BEACH FL 33409			83	
				85 Zip Code
11, Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes, the Florida. Such change was author	ne above-named ized by the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
Bgent I a	m tamiliar with, and accept the obvigant	#15 OI, 3000001 007.0000, 1 lakes	<b>541,045</b> 2	
	Signature, typed or printed name of registered agent			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND		<u>13.</u> L1 TILE	ADDITIONS: CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	CANNON, EVELYN J		1.2 NAME	
STREET ALORESS	3008 RIDGEWAY AVENUE	·	1.3 STREET ADDRESS	. ] [
CITY-ST-ZP	WEST PALM BEACH, FL00000		1.4 CITY-ST-ZIP	PD MChange Addition
TITLE	PD		21 TITLE 22 NAME	GATO IA D CHNNON  1200 OSCEOLD DIVC  WEST PAIM BEACH FI. 33409.
NAME STREET ALXORESS	CANNON, GAROLD D  2627 WEST GATE AVENUE		2.3 STREET ADDRESS	ADD OSCEDIA Drive
CITY-ST-ZP	WEST PALM BEACH, FL00000		2.4 CTTY-ST-ZIP	West PAlm Beach Fl. 33409.
TITLE	D	D DELETE :	3.1 TITLE	☐ Change ☐ Add tion
NAME	CANNON, R'O	, ,	3.2 NAME	
- STREET ALXORESS			3.3 STREET ADORESS	l
CTY-ST-ZP	WEST PALM BEACH, FL00000		M. CITY-ST-ZIP	DIRECTOR C Change MAddition
NAME			I. 2 NAME ~	Director S. Saleeby Richard S. Saleeby 3008 Ridge WAY AVE. West Pain Beach F1. 33405
STREET ACORESS	·		IJ STREET AOORESS	3008 Ridge WAY AVC
CITY-ST-ZP			A CITY-ST-ZIP	West Pains Beach F1. 33405
TITLE			5.1 TITLE 5.2 NAME	Charge Chauton
NAME STREET ADDRESS			3.3 STREET ADORESS	
OTY-ST-IP			S.4 CITY-ST-ZIP	
TITLE		G	B.1 TITLE	☐ Change ☐ Add blon
NAME		•	52 NAME	
STREET ADDRESS		1	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
CTTY-ST-2IP	L	1'	a+ult-Si-ZP	tio Continue 440 07/3/4/ Etanda Clabetan I further cortife that the information

14. I 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 supplementat 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 chapted, or an an attachment with an address, with all other like empowered.