

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 594638**

1. Entity Name

WESTLAND DISCOUNT INC.**FILED**
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90048 033 ***150.00

Principal Place of Business

Mailing Address

**10780 W. FLAGLER
MIAMI FL 33174
US****7500 NW 69 AVE
MIAMI FL 33166-2502
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1952748**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****DIAZ, ENRIQUE J
7500 N.W. 69TH AVENUE
MEDLEY FL 33166**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE **PD** ☒ Delete
NAME **CLAVIJO, EDUARDO A.**
STREET ADDRESS **3541 FLAMINGO DR.**
CITY-ST-ZIP **MIAMI BEACH FL**TITLE **PRESIDENT** ☒ Change ☒ Addition
NAME **ENRIQUE J. DIAZ**
STREET ADDRESS **10341 S.W. 37 ST.**
CITY-ST-ZIP **MIAMI FL 33165**TITLE **VP** ☒ Delete
NAME **DIAZ, ENRIQUE J**
STREET ADDRESS **10341 SW 37 ST,**
CITY-ST-ZIP **MIAMI FL**TITLE **- SECR.** ☐ Change ☒ Addition
NAME **RAUL MENDEZ**
STREET ADDRESS **12661 N.W. 99 PL.**
CITY-ST-ZIP **MIAMI GARDENS FL 33018**TITLE **T** ☒ Delete
NAME **GONALEZ, REYNALDO**
STREET ADDRESS **8101 NE 166 ST**
CITY-ST-ZIP **MIAMI FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **S** ☒ Delete
NAME **GONZALES, PRISCILLA**
STREET ADDRESS **8350 NW. 167 TERR**
CITY-ST-ZIP **MIAMI FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ENRIQUE J. DIAZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

ENRIQUE J. DIAZ 1/26/00

Daytime Phone #

305-885-9114

CR2E034 (9/99)