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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 641602

1. Corporation Name

WESTCHESTER WICKER, INC.

Principal Place of Business	Mailing Address	
12249 S. DIXIE HIGHWAY MIAMI FL 33156	12249 S. DIXIE HIGHWAY MIAMI FL 33156	
2. Principal Place of Business	2a. Mailing Address	

**FILED** Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90016 043 \*\*\*150.00



Principal Place	of Business	Maning Address							
12249 S. DIXIE MIAMI FL 33150		12249 S. DIXIE HIGHWAY MIAMI FL 33156				DO NOT WE	RITE IN THIS S	SPACE	
					-				
					1	Date Incorporated or Qualifer	u		
			_			10/11/1979		<del></del>	
2. Principal Pl	lace of Business	2a. Mailing Address			1	FEI Number			oplied For
26					<u>59-1947874</u>		<u>N</u>	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					Cartifactor of Status Desired		\$8.75	Additional	
22		27			3.	Certifcate of Status Desired	ш	Fee Re	equired
City & State	9	City & State			6.	Election Campaign Financing	1 _	\$5.00	May Be
<del></del>	-	28				Trust Fund Contribution	' <b>□</b>		to Fees
Zip	Country Zip Coun						rrent vear Inta		
			¬ `					Yes	™No
24	25 29 30		<u> </u>	Personal Property Tax. Yes You No. Name and Address of New Registered Agent					
	9. Name and Address of Curr	ent Registered Agent	81	Nama	<u> </u>	Maine and Address of New	Negratered A	gent	
7EDI	MENO, RICHARD W.		0 '	Name (	Lìch	ARD CERMEN	)D		
			82			O. Box Number is Not Accer	otable)		
	21 SW 98 AVE			122	49	5. DIXIE HW	У		
MIAN	MI FL 33176		83			1	-		
						·			
			84	City	RIM		FL	85 Zip	Code 3156
				1,1,1	11 601 4	automite this statement for th		banging its	registered
11. Pursuant	to the grovisions of Sections 607.0	502 and 607.1508, Florida Statutes,	tne above orized by	e-named corporati	poration tion's boa	ard of directors. I hereby acc	ept the appoin	tment as re	egistered
agent. I a	m familiar with and accept the obli	te of Florida. Such change was auth gations of, Section 607 0505, Florida	Statutes			//	ے شرو	20	
SIGNATURE	TO SOME	(MA)				7-	05/	7-	
	Signature, typed or printed name of registered a	<u> </u>		nt signature requir		ADDITIONS/CHANGES TO C	DATE AND	DIRECTO	NDC IN 12
12.		AND DIRECTORS	13.		7DT5	IDDITIONS/CHANGES TO C	FFICERS AINL		Addition
TITLE	DP	☐ DELETE	1.1 TITLE			W ZERMENO		Change	Addition
NAME	ZERMENO, RICHARD		1,2 NAME	K	CHAK	D SCHWENC			}
STREET ADDRESS	12249 S DIXIE HWY		1.3 STREE	TADDRESS (	2249	5-Dixie Hwy 11,76. 33156			ľ
CITY-ST-ZIP	MIAMI FL		1,4 CITY-S	T-ZIP IN	M. Mr	11,56. 33156		_	
TITLE	<del>198-</del>	DELETE	2.1 TITLE					☐ Change	☐ Addition
NAME -	-ZERMENO, MICHAEL	,	2.2 NAME						
	-12249 S-DIXIE-HWY-			2.3 STREET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	-MIAMI-FL-	Files ere	2. 4 CITY-5	ST-ZIP				☐ Change	Addition
TITLE		DELETE 3.1		3.1 TITLE				□ cuange	
NAME	3.21		3.2 NAME						
STREET ADDRESS	ESS 3.3 S		3.3 STREE	TADDRESS					
CITY-ST-ZIP			3.4. CITY- 9	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME			4, 2 NAME						1
				TADODESS					1
STREET ADDRESS				TADORESS					
CITY-ST-ZIP		C) DELETE	4.4 CITY-S	r-ZiP			<del></del>	Change	Addition
TITLE		☐ DELETE	5.1 TITLE					criainge	
NAME			5.2 NAME						
STREET ADDRESS			5,3 STREE	TADDRESS					į
CITY-ST-ZIP			5.4 CITY-S	T- ZIP					
TITLE		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition
NAME			6.2 NAME						i
			6.3 STREE	TADDRESS					
STREET ADDRESS				ľ					
CITY-ST-ZIP		/	6.4 CITY-S	1-21P				_	

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 suppliemental 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 trusten ampowered 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, with all other like empowered.

SIGNATURE:

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