

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

FILED

Mar 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 649459 (5)  
1. Corporation Name  
WESTOK INTERNATIONAL CORPORATION

Principal Place of Business 3033 RIVIERA DR STE 201 NAPLES FL 34103 US	Mailing Address 3033 RIVIERA DR STE 201 NAPLES FL 34103 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/27/1979	4. FEI Number 59-2130055	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent BUDD, DAVID G. 3033 RIVIERA DR STE 201 NAPLES FL 34103	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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10. Name and Address of New Registered Agent
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	RUBIN, ALEX
STREET ADDRESS	3033 RIVIERA DR., STE. 201
CITY-ST-ZIP	NAPLES, FL 00000
TITLE	STD
NAME	RUBIN, HARRY
STREET ADDRESS	3033 RIVIERA DR., STE. 201
CITY-ST-ZIP	NAPLES FL
TITLE	V
NAME	RUBIN, BENJAMIN
STREET ADDRESS	3033 RIVIERA DR., STE. 201
CITY-ST-ZIP	NAPLES FL
TITLE	VAS
NAME	RUBIN, LINDA
STREET ADDRESS	3033 RIVIERA DR., STE. 201
CITY-ST-ZIP	NAPLES FL
TITLE	<del>AS</del>
NAME	<del>ZUCCARO, SHARON M.</del>
STREET ADDRESS	<del>3033 RIVIERA DR., STE. 201</del>
CITY-ST-ZIP	<del>NAPLES FL</del>
TITLE	V
NAME	BUDD, DAVID G.
STREET ADDRESS	3033 RIVIERA DR., STE. 201
CITY-ST-ZIP	NAPLES FL

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 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: David G. Budd David G. Budd, Vice-President 3/2/98 (941) 263-7700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0436279

CR2E034 (1097)