

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 # 649459

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/27/1979

4. FEI Number

59-2130055

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BUDD, DAVID G.
3033 RIVIERA DR
STE 201
NAPLES FL 34103

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RUBIN, ALEX	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	
CITY-ST-ZIP	NAPLES, FL 00000	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	RUBIN, HARRY	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	
CITY-ST-ZIP	NAPLES FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	RUBIN, BENJAMIN	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	
CITY-ST-ZIP	NAPLES FL	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	ZUGGARO, SHARON M.	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	
CITY-ST-ZIP	NAPLES FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BUDD, DAVID G.	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	RUBIN, LINDA	
1.3 STREET ADDRESS	3033 RIVIERA DR., STE. 201	
1.4 CITY-ST-ZIP	NAPLES, FL 34103	
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, with all other like empowered.

SIGNATURE:

David G. Budd,
Vice President

3/16/99

(941) 263-7700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)