

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

FILED
Mar 19 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 # 688602 (2)
1. Corporation Name
OCEANS WEST, INC.

Principal Place of Business
2990 S ATLANTIC AVE
DAYTON BCH SHRS FL 32118-6002

Mailing Address
2990 S ATLANTIC AVE
DAYTON BCH SHRS FL 32118-6002



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4000 Old Dixie Highway Suite, Apt. #, etc. 22 City & State 23 Ormond Beach FL Zip Country 24 32174 25 Volusia		2a. Mailing Address 26 4000 Old Dixie Highway Suite, Apt. #, etc. 27 City & State 28 Ormond Beach FL Zip Country 29 32174 30 Volusia		3. Date Incorporated or Qualified 09/10/1980	
				4. FEI Number 59-2160307	
				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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TUMBLESON, J. DOYLE 50 SOUTH PALMETTO AVE. DAYTONA BEACH FL 32014		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	
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S JENSEN, ALFRED	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2990 SOUTH ATLANTIC AVE	1.2 NAME	
STREET ADDRESS	DAYTONA BEACH SHORES FL	1.3 STREET ADDRESS	4000 Old Dixie Highway
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Ormond Beach FL 32174
TITLE	VD COLLINS, ANN	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2990 SOUTH ATLANTIC AVE	2.2 NAME	
STREET ADDRESS	DAYTONA BEACH SHORES FL	2.3 STREET ADDRESS	4000 Old Dixie Highway
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Ormond Beach FL 32174
TITLE	PTD UANINO, ANTHONY	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2990 SOUTH ATLANTIC AVE	3.2 NAME	
STREET ADDRESS	DAYTONA BEACH SHORES FL	3.3 STREET ADDRESS	4000 Old Dixie Highway
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Ormond Beach FL 32174
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Anthony Uanino* 3/13/98

CR2E034 (10/97)