

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005389

FILED
Apr 01, 2005
Secretary of State

Entity Name: WESTPAC FINANCIAL SERVICES INC.

Current Principal Place of Business:

15751 ROCKFIELD BLVD #200
IRVINE, CA 92618

New Principal Place of Business:

Current Mailing Address:

15751 ROCKFIELD BLVD #200
IRVINE, CA 92618

New Mailing Address:

FEI Number: 95-4503106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES INC.
1333 NORTH DUVAL STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: AGAHI, MONSEF
Address: 2660 N. MERIDIAN
City-St-Zip: ORANGE, CA 92867

Title: VC () Delete
Name: AGAHI, FARBOD
Address: 2660 N. MERIDIAN
City-St-Zip: ORANGE, CA 92867

Title: VP () Delete
Name: GIBSON, STEVE
Address: 42084 THOROUGHbred LANE
City-St-Zip: MARRIETA, LA 92562

Title: T () Delete
Name: AGAHI, TERESA
Address: 2660 N. MERIDIAN
City-St-Zip: ORANGE, CA 92867

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONSEF AGAHI

CPS

04/01/2005

Electronic Signature of Signing Officer or Director

Date