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Feb 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000117 (2)

1. Corporation Name
WESTBURY IMPORTS, LTD., INC.



Principal Place of Business

045 SOUTH MILITARY TRAIL SUITE 6
WEST PALM BEACH FL 33415

Mailing Address

045 SOUTH MILITARY TRAIL SUITE 6
WEST PALM BEACH FL 33415

3. Date Incorporated or Qualified
12/22/1992

3a. Date of Last Report
04/12/1996

2. Principal Place of Business

21 551 S. Military Trail
Suite, Apt. #, etc.

2a. Mailing Address

26 551 S. Military Trail
Suite, Apt. #, etc.

4. FEI Number

11-3115117

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 has liability for intangible tax under s. 199.032,
Florida Statutes



Yes ☐ No

22 City & State

23 West Palm Beach, FL.

27 City & State

28 West Palm Beach, FL.

24 Zip

33415

Country

USA

29 Zip

33415

Country

USA

9. Name and Address of Current Registered Agent

THOMPSON, DOUGLAS E
645 SOUTH MILITARY TRAIL SUITE 6
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

81 Name

SAME

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

4524 Gun Club Rd., Suite 101

83

84 City

West Palm Beach

FL

85 Zip Code

33415

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

Douglas E. Thompson

(NOTE: Registered Agent signature required when reinstating)

01/14/97

DATE

12. OFFICERS AND DIRECTORS

TITLE CP
NAME STALUPPI, JOHN
STREET ADDRESS 551 SOUTH MILITARY TRAIL
CITY-ST-ZIP WEST PALM BEACH FL 33415

☐ DELETE

TITLE S
NAME STALUPPI, JEANETTE
STREET ADDRESS 551 SOUTH MILITARY TRAIL
CITY-ST-ZIP WEST PALM BEACH FL 33415

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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: John Staluppi, Pres.

01/14/97 (561) 683-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)