Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90024 018 ***158.75

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

Mailing Address

3100 N 29TH CT

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400003115

1. Corporation Name

Principal Place of Business

3100 N 29TH CT

WEST TROPICAL INVESTMENTS CORP.

SUITE 230 HOLLYWOOD F	33020		SUITE 230 HOLLYWOOD FL 33020			ļ	DO NOT WRITE IN THIS SPACE			
US US							Date Incorporated or 06/15/1994			
2. Principal Place of Business 2a. Mailing Address							FEI Number		Apı	plied For
_	W. Prospect Road 26 4950 W. Pro				ct Ro	Not Applical			t Applicable	
Suite, Apt.		30 <u>2_10aa</u>		Suite, Apt. #, etc.			SS 75 Additional			
22			27			5.	Certifcate of Status I	Desired 🛣	Fee Re	quired
City & State	e		City & State				Election Campaign F	inancing _	\$5.00	May Be
	Lauderdal	le, FL	28 Fort La	Fort Lauderdale, FL			Trust Fund Contribut	1 6	Added to	, I
Zip		ountry	Zip	Cou			This corporation owe		ear Intangible	
24 33309	25 T	└	33309 30 USA			Personal Property Tax. ☑ Yes No				
24 33303	ddress of Current	1001		10. Name and Address of New Registered Agent						
					81 Name					
ADE	lstein, steven				-		<u> </u>	-1-1-1		
624 WEST TROPICAL WAY					82 Stree	t Address (P	.O. Box Number is No	ot Acceptable)		
PLANTATION FL 33317										
		•			83					
					84 City	_	-		FL 85 Zip C	Code
11, Pursuant	to the provisions of	Sections 607.0502	and 607.1508, Florida of Florida, Such change	Statutes, the a	ove-named by the con	d corporation	submits this statementard of directors. I her	ent for the purp	ose of changing its appointment as reg	registered gistered
agent. Na	m familiar with, and	accept the obligati	ions of, Section 607.050	5, Florida Stati	ites.					
SIGNATURE	XL A	t- God	dot	Ste	ren Ad	<u>lelste</u>	in, Presi	<u>dent 4,</u>	/ <u>8/9</u> 9	
	Signature typed or pante	name of registered agent		(NOTE: Registered	Agent signature			O TO OFFICE	DO AND DIDECTO	DC IN 12
12.	- DD	OFFICERS ANI		13.		T PD *	ADDITIONS/CHANGE	S 10 OFFICE	Change	Addition
TITLE	PD	TO JENI	DELE				stein, St	AVAN	Citalige	☐ 700%011
NAME	ADELSTEIN, ST			1.2 N/		ANEN			- A	ļ
STREET ADDRESS	3100 N 29TH (1.3 ST	REET ADDRESS		W. Prosp			
CITY-ST-ZIP	HOLLYWOOD I	-L 33020			Y-ST-ZIP	Fort	Lauderda	те, ғь		
TITLE			☐ DELE	TE 2.1 ΤΓ	Œ				☐ Change	Addition
NAME				2.2 N	ME					
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CITY-ST-ZIP				2.4 C	TY-ST-ZIP	1	•			
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NAME				3.2 N	ME					
STREET ADDRESS				3.3 S	REET ADDRESS	s			•	1
CITY-ST-ZIP					TY-ST-ZIP					
TITLE			DELE			 		***************************************	☐ Change	☐ Addition
NAME				4. 2 N		Í				-
STREET ADDRESS					REET ADDRESS					
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CITY-ST-ZIP					TY-ST-ZIP	 			☐ Change	Addition
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NAME			-		REET ADDRESS					
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CITY-ST-ZIP			- Finer			+	<u></u> -		Change	Addition
TITLE			DELE							La riddiadii
NAME	,			6.2 N	ME REET ADDRESS	_				

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

REQUIRED Adelstein

4/8/99

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 an an attachment with an address, with all other like empowered. 954-745-0077