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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600002845 (3)

PREFERRED WEST GATE, INC.

FILED May 06 1997 8:00am Secretary of State

Drington Diag	of Pusings	Alaitia Adda				
Principal Place of Business		ŭ	Mailing Address		1 (49):49 /:10 (0):17 4(1): 40(1) 40(1)	dalte bared bilde ibett Billi Bill 1881
		6900 E 2ND ST SCOTTSDALE AZ 85251-5				
					3. Date Incorporated or Qualified 06/06/1996	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					APPLIED FOR 93-14	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	¬ '		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country Zip Col		Countr	У	8. This corporation has liability for it	, , _
24	25	29	30			Yes No
The state of the s					10. Name and Address of New Reg	gistered Agent
C T CORPORATION SYSTEM			Б			
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			В	Street A	ddress (P.O. Box Number is Not Acceptab	le)
FLA	NIMION FL 00024		6:	3	·····	
.			84	City		B5 Zip Code
				7		FL
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 Stalules.						
SIGNATURE	Signature, typed or printed name of registered ag	and and the it and cable (BIC)	If: Registered A	and signalure t	equired when reinstating)	DATE
12.	- N-1	ID DIRECTORS	13.	gent ang lantine in	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	DC	☐ DELETE	1.1 THEF		DO AND DP	Change Addition
NAME	(0102100) 2002112		1.2 NAME			
STREET ADDRESS 6900 E 2ND ST			1.3 STREET ADD			
CITY-ST-ZIP	SCOTTSDALE AZ 85251		1.4 CITY-	ST-7IP		
TITLE			2.1 TITLE	1		Change Addition
NAME	ORENSTEIN, FRANK		2.2 NAME			
STREET ADDRESS	6900 E 2ND ST SCOTTSDALE AZ 85251			T ADDRESS		
CITY-ST-ZIP TITLE	VS	DATOLLETE	2.4 CITY 3.1 TITLE	-51-214	VS	Change Addition
NAME	imia m attinina i		3.2 NAME		CAROL RICHARDS	
STREET ADDRESS			3.3 STREE	1 ADDRESS	6900 €. 2 5T.	
CITY-ST-ZIP	SCOTTSDALE AZ 85251		3.4 CHY	- \$1 - ZIP	Scottsoale AZ &	5251
TITLE	S	☐ DELF1E	4.1 TITLE			Change Addition
NAME	POER, PAUL		4.2 NAM			
STREET ADDRESS	6900 E 2ND ST			1 ADDRESS		
CITY-ST-ZIP	SCOTTSDALE AZ 85251	ADELLIE	4.4 City			Change Addition
TITLE NAME	S Greene, Morley	- 2000	5.1 TITLE 5.2 NAME		CLIERS MARSH	Find primitive Ent subtition
STREET ADDRESS	700 E GEORGIA ST #2910			T ADDRESS	CLIFF S. MARSH 6900 E. DNE ST.	
CITY-ST-ZIP	VANCOUVER BC CANADA V7	X IB6	5.4 CITY		SCOTTSDACE, AZ &	P5251
TITLE		DELFTE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STRE	I ADDRESS		
CHTY-ST-ZIP	1		S.A.CITY.	Q1.7ID		

14. I do hereby certify that the information supplied with this filling 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 supplicated annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the accorder or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it offacted by an attackment with an address.