

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90215 046 ***150.00

DOCUMENT # F99000002027

1. Entity Name
WESTWOOD BUILDERS, INC.



Principal Place of Business
**6919 ROYAL ORCHID CIRCLE
DELRAY BEACH, FL 33446**

Mailing Address
**6919 ROYAL ORCHID CIRCLE
DELRAY BEACH, FL 33446**

DO NOT WRITE IN THIS SPACE

04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
52-1802584

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

Greenberg + Stralitz, P.A.
LAW OFFICE OF JEFFREY L. GREENBERG, P.A.
4800 N. FEDERAL HWY.
SUITE 304-D
BOCA RATON, FL 33431

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	BLUM, STEVEN
STREET ADDRESS	6919 ROYAL ORCHID CIRCLE
CITY - ST - ZIP	DELRAY BEACH, FL 33446
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Steven Blum* **Steven Blum**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/04
Date

5614141727
Daytime Phone #