FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

G45875

(3)

FILED
Jan 30 1996 8:00 am
Secretary of State

NEAR	WEST, INC.					
Principal Place	of Business	Mailing Address			1 1001131 0017 01001 01101 10113 10	BOI BIIN BIBIN BIBIN BIBIN BIBIN BIBIN BIBIN BIBIN BIBIN
3862 SHERIDAN STREET HOLLYWOOD FL 33021		3862 SHERIDAN STREET HOLLYWOOD FL 33021				
					3. Date Incorporated or Qualified 06/23/1983	3a. Date of Last Report 01/26/1995
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
21		26		59-4621058	Not Applicable	
Suito, Apt. #, etc [22]		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
- Zφ	Country	Zip	Соиг	try	8. This corporation has liability for	
24	25 9. Name and Address of Curre	29	30			No
	g, Hame and Address of Corpe	iii negistered Agent		B1 Name	10. Name and Address of New F	legistered Agent
HILL, C	NI IN					
	HERIDAN STREET			B2 Street Ad	ddress (P.O. Box Number is Not Acceptat	ile)
	WOOD FL 33021		-	B3		
			1	84 City		FL 85 Zip Code
or registere familiar with SIGNATURE	of agent, or both, in the State of Flor in, and accept the obligations of, Sec Spacer, the objections are being the layer	ida. Such change was authoriz diori 607.0505, Florida Statutes	ed by the co s.	orporation's b	coration submits this statement for the pur pard of directors. I hereby accept the app	ointment as registered agent. I am
		ND DIRECTORS	13.	gent signature raq	ared when reinstating: ADDITIONS/CHANGES TO OFF	DATE
TIBLE	PD	DELETE	1.1 1/1	LE	ADDITIONS/OFFAINGES TO OFF	Change Addition
NAME	HILL, OLIN M., III		1.2 NAI	vite		
STREET ACCINGSS	3862 SHERIDAN ST.		1 3 516	EET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 C/T	Y-S1-ZIP		
TIFLE	SD	☐ DELETE	2 1 11	LE		Change Addition
NAME	COMPAGNONE, ANTHONY	í	2 2 NAI	ME.		
SPREED ADDRESS	3862 SHERIDAN ST.		2 3 S1F	EET ADDRESS		
Cally ST 2ii	HOLLYWOOD FL	— — — — — — — — — — — — — — — — — — —		Y-ST ZIP		
1(1,1		DELETE	3 1 TiT			Change Addition
NAME STREET ADDRESS			3 2 NAI	·		
				REFT ADDRESS		
_ CHTY ST-ZIF:		DELFTE	4 1 10	Y-ST-ZIP		Change Addition
NAME			4.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY - ST- ZIF				Y - ST - ZIP		
1HiF		DELETE	5 1 717			Change Addition
NAME			5 2 NA!	ME		
STEEL LADORESS			53\$16	EET ADDRESS		
City - St - Zif			5,4 017	Y-ST-ZIP		
HILF		☐ DELETE	6 1 7:1	LE		Change Addition
NAME			6.2 NA!	ME		
STREET ADDRESS			6381	EET ADDRESS		
CON-SI-ZIE	egeng og ere gronner og en og er		6 4 CII	Y-ST-ZIP		

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cells, 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 or phylogrephic and the same legal effect as if made under cells.

SIGNATURE:

GRATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/96 (3es)991-7511

Daviana Prione #