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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

1. Corporation Name

H31100

(1)

WESTPARK REALTY OF BROWARD, INC.

Principal Place of Business Mailing Address				ı iddiğir Arad tırdı kisal tilbil dötli dötli dötli	ı Bibir 31841 Bibil Bibil Bibil 1881	
15872 STATE RD. 84 15872 STATE RD. 8 FORT LAUDERDALE FL 33326 FORT LAUDERDALE						
					3. Date Incorporated or Qualified 3a. [	Date of Last Report 10/19/1995
Principal Place of Business		2a. Mailing Address 26	<del></del>		4. FEI Number 59-2473026	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<del>  </del>		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	Country 30		8. This corporation has liability for intangible Florida Statutes Yes □ No	· · · · · · · · · · · · · · · · · · ·
	9. Name and Address of Curi		1301		10. Name and Address of New Register	
			81	Name		
GOBER, GEORGE L			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
	/. COMMERCIAL BLVD. AC FL 33351		83			·
IAMAN	AU FL 33351		63			
			84	City	F	85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Stat	utes, the above	named corpo	ration submits this statement for the purpose of	changing its registered office
or register familiar wi	red agent, or both, in the State of Fil th, and accept the obligations of, Se	orida. Such change was autho ection 607.0505, Florida Statut	rized by the corp es.	oration's boa	and of directors. I hereby accept the appointment	as registered agent. I am
SIGNATURE	· <u>-</u> · · · - <del>- · · · · · · · ·</del>					
12.	Signature, typed or printed name of registered ag OFFICERS 4	ent and title Tapplicable (  AND DIRECTORS	NOTE: Registered Ager	it signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1, 1 TITLE		ADDITIONS/CHAINGES TO OFFICERS A	Change Addition
NAME	CANFIELD, CHARALANE	_	1.2 NAME			
STREET ADDRESS	16617 WATERS EDGE DR.		1.3 STREET	ADDRESS		
CITY-ST-ZiP	FT. LAUDERDALE FL		1.4 CITY - S	T - ZIP		
TITLE	PD PIAR, CARLOS	DELETE	2. 1 TITLE	İ		Change Addition
NAME STREET ADDRESS	16180 SADOLE LANE		2.2 NAME	4D00566		
CITY-ST-ZIP	FT. LAUDERDALE FL 3332	6	2 3 S1R£E1 2 4 CITY - S			
TITLE		DELETE	3 1 TITLE	1-21		Change Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
C:TY-ST-Z:P			3 4 CHY - S	1 - ZIP		
TITLE		☐ DELETE	4 1 TITLE			Change Addition
NAME STREET ADDRESS			4.2 NAME	ADDDESS		
CITY-ST-ZIP			4.3 STREET 4.4 CITY - S			
TITLE		☐ DELETE	5. 1 TiTLE	1-21		☐ Change ☐ Addition
NAME		<del></del>	5.2 NAME			
STREET ADDRESS			5 3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE	-		☐ Change ☐ Addition
NAME			6.2 NAME	ĺ		
STREET ACCRESS			6.3 STREET			
14. Ldo bereb	v certify that the information supplie	d with this filing is voluntarily for	6.4 City-\$		for the exemption stated in Section 119.07(3)(k),	Florida Statutes I further
certify that oath: that i	t the information indicated on this ar	nnual report or supplemental ar poration or the receiver or trus	noual report is tru tee empowered t	e and accura	ate and that my signature shall have the same key is report as required by Chapter 607, Florida Sta	al effect as if made under

SIGNATURE: SIGNATURE AND TYPED OR PRIN

96 (954)726-8866

A NACIONA CARRO NACIONAL ALCON DALLA CONTRACTORA DI ANCIA 