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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mailing Address

DOCUMENT # **H53556**

Principal Place of Business

HIALEAH WEST COAST, INC.

105 E. 21ST STREET P.O. BOX 158. N/A HIALEAH FL 33010 US		105 E. 21ST STREET P.O. BOX 158 HIALEAH FL 33010 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/23/1985			
2. Principal Pla	ace of Business	2a. Mailing Address			4, FEI Number		Applied For	
21		26			NOT APPLICABLE		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
23		28						
Zip	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible ∐Yes	□No	
24	25	29 30	<u> </u>		Personal Property Tax. 10. Name and Address of New Regist			
	Name and Address of Curre	nt Registered Agent		•1	10. Name and Address of New Regist	sien Wheiir		
VAN	LINDT, JOHN		81					
105 E 21 ST.		82 Street		Street Add	iress (P.O. Box Number is Not Acceptable)			
HIALEAH FL 33010			83					
:			84	City		F1 85 Zi	p Code	
agent. I a	egistered agent, or both, if the state in familiar with, and accept the oblig Signature, typed or printed name of registered ag	ations of, Section 607,0505, Florida	Statutes		poration submits this statement of the purposition's board of directors. I hereby accept the			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER			
TITLE	Р	☐ DELETE	1.1 TITLE			Chang	e 🗌 Addition	
NAME	BRUNETTI, JOHN J.		1.2 NAME		•		j	
STREET ADDRESS	105 E 21ST ST.		1.3 STREE	TADDRESS				
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-S	T-ZIP				
TITLE	V	☐ DELETE	2,1 TITLE			☐ Chang	e	
NAME	BRUNETTI, JOHN J., JR.		2.2 NAME					
STREET ADDRESS	105 EAST 21ST STREET		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	HIALEAH FL		2.4 CITY-	ST-ZIP	<u> </u>	C Chann	- L' Addition	
TITLE	S	☐ DELETÉ	3.1 TITLE			Chang	e	
NAME	Brunetti, Stephen P.		3.2 NAME				1	
STREET ADDRESS	105 E 21ST STREET			TADORESS	-			
CITY-ST-ZIP	HIALEAH FL.		3.4. CITY-	ST-ZIP		☐ Chang	ie Addition	
TITLE	T	☐ DELETÉ	4.1 TITLE					
NAME	BOBER, MONROE		4.2 NAME					
STREET ADDRESS	105 E 21ST ST.			TADORESS				
CITY-ST-ZIP	HIALEAH FL	DELETE	4.4 CITY-5 5.1 TITLE	ST-ZIP		☐ Chang	je 🔲 Addition	
TITLE		_ beech	5.2 NAME		•			
NAME				T ADDRESS				
STREET ADDRESS	,		5.4 CITY-					
CITY-ST-ZIP		☐ DELĒTE	6.1 TITLE	-		☐ Chang	ge	
TITLE			6.2 NAME			•		
NAME			6.3 STREE	T ADDRESS				
STREET ADDRESS	1			1				

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 on an advantagement with an address, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

KrJohn J. Brunetti - President SIGNING OFFICER OR DIRECTOR

FILED

Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90066 002 ***150.00

Daytime Phone #