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

TITLE

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED Mar 24 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J47188 (4) WEST ACRES, INC. Mailing Address Principal Place of Business C/O BAROUH, PERERA & ASSOC C/O BAROUH, PERERA & ASSOC 48 EAST FLAGLER STREET. SUITE 368 48 EAST FLAGLER STREET. SUITE 368 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified 12/15/1986 2. Principal Place of Business FEI Number 2a. Mailing Address Applied For 21 59-2756606 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Ζip Country Zφ 8. This corporation owes or has paid the current year Intangible □ No Yes 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHULTZ, STEVEN A. 200 SOUTH BISCAYNE BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 3150** 8 **MIAMI FL 33131** 84 City Zip Code 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 Statutes. SIGNATURE Signature, typed or ported name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition Change TITLE 1.1 TITLE BEHRENS, ALFREDO A. NAME 1.2 NAME **APARTADO 62** STREET ADDRESS 1.3 STREET ADDRESS CARACAS, VENEZUELA CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change 2.1 TITLE Addition TITLE BEHRENS, ANDRES 2.2 NAME NAME STREET ADDRESS 205 PALM AVENUE 2.3 STREET ADDRESS MIAMI BEACH FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE BEHRENS, ALFREDO JR 3.2 NAME NAME STREET ADDRESS APARTADO 62 3.3 STREET ADDRESS CARACAS, VENEZUELA CITY-ST-ZIP 3.4. CiTY-ST-ZiP DELETE 4.1 TITLE Addition TITLE BEHRENS. HENRIQUE 4.2 NAME NAME STREET ADDRESS APARTADO 62 4.3 STREET ADDRESS CARACAS, VENEZUELA CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME SCHULTZ, STEVEN A 5.2 NAME 200 SOUTH BISCAYNE BLVD, SUITE 3150 STREET ADDRESS **5.3 STREET ADDRESS** MIAMI FL 54 CITY-ST-ZIP CITY-ST-ZIP

DELETE

6.1 TITLE

6.2 NAME **6.3 STREET ADDRESS** 

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 attachment with an address.

SIGNATURE:

6.4 CITY-ST-ZIP

CR2E034 (10/97

Спапре

Addition