

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90431 028 ***150.00

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1. Entity Name

WEST FORT LAUDERDALE II, INC.



Principal Place of Business

2419 EAST COMMERCIAL BLVD SUITE 100
FT LAUDERDALE, FL 33308

Mailing Address

2419 EAST COMMERCIAL BLVD SUITE 100
FT LAUDERDALE, FL 33308

94064403



2. Principal Place of Business

87 NE 44th Street

3. Mailing Address

Suite, Apt. #, etc.

#4

Suite, Apt. #, etc.

City & State

Oakland Park, FL

City & State

Zip

33334

Country

Zip

Country

02202004

Chg-P

CR2E034 (10/03)

4. FEI Number

20-0396792

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLODIG, GREGORY J ESQ
GREENSPOON MARDER HIRSCHFIELD ET AL.
100 W CYPRESS CREEK ROAD SUITE 700
FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 D ☐ Delete
NAME VERRILLO, JAMES
STREET ADDRESS 2419 EAST COMMERCIAL BLVD SUITE 100
CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE D ☐ Delete
NAME LAMBERT, DANIEL
STREET ADDRESS 2419 EAST COMMERCIAL BLVD SUITE 100
CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE OFFICER ☐ Change ☒ Addition
NAME HEYDEN, CHRISTINA
STREET ADDRESS 2419 E. COMMERCIAL BLVD, STE 100
CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #