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

APPROVED AND FILED
99 MAY 12 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21022

1. Corporation Name
WESTREC MANAGEMENT CLEARING COMPANY INCORPORATED

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
16633 VENTURA BLVD SIXTH FLOOR ENCINO CA 91436 US	16633 VENTURA BLVD SIXTH FLOOR ENCINO CA 91436 US

2. Principal Place of Business
21
Suite, Apt #, etc 22
City & State 23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualified: 09/23/1988
4. FEI Number: 95-4143937 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name: C T Corporation System
82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
83
84 City: Plantation FL 85 Zip Code: 33324

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 David I. Farber, Asst. Secretary [signature] DATE 4-7-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	PSD	☐ DELETE
NAME	SACHS,MICHAEL M.	
STREET ADDRESS	16633 VENTURA BLVD	
CITY-ST-ZIP	ENCINO CA	
TITLE	D	☐ DELETE
NAME	WILLIAM W. ANDERSON	
STREET ADDRESS	16633 VENTURA BLVD., 6TH FLOOR	
CITY-ST-ZIP	ENCINO CA	
TITLE	VPCO	☐ DELETE
NAME	JEFFREY K. ELLIS	
STREET ADDRESS	16633 VENTURA BLVD., 6TH FLOOR	
CITY-ST-ZIP	ENCINO CA	
TITLE	AS	☐ DELETE
NAME	MARY PASTORE	
STREET ADDRESS	16633 VENTURA BLVD., 6TH FLOOR	
CITY-ST-ZIP	ENCINO CA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	5/12	☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS	04-15-99 90070 026 $158.75	
6.4 CITY-ST-ZIP		

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, with all other like empowered.

SIGNATURE: [signature] JEFFREY K. ELLIS 4/6/99 (818) 907-0400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #