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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # **P9200004690 (3)**

WESTERN MARKETING, INC.

8500 CLEVELAND STREET 3500 CLEVELAND STREET HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-4921 3a. Date of Last Report 3. Date Incorporated or Qualified 11/16/1992 11/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0418571 21 26 Not Applicable Suite, Apt. ≢, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired $oldsymbol{\boxtimes}$ 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 Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes 24 25 29 30 Yes 🗭 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHATTERSON, RALPH E 3500 CLEVELAND ST 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 City Zip Code 11. Pursuant to the provisions of So office or register diagent, or be Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of, Section 607.0505, Florida Statutes. agent Lam land 1997 85. 40 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. PSD Change DELETE 1.1 TITLE THUE CHATTERSON, RALPH E 1.2 NAME NAME 3500 CLEVELAND STREET 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY - ST - ZIE 1.4 CITY - ST - ZIP DELETE Change ___ Addition 21 TITLE TILLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 City-St-ZiP CITY \$1 70° DELETE Change ___ Addition 31 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST- ZIP DELETE Change ☐ Addition TILLE 4.1 TITLE 4, 2 NAME NAVE 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE HILE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CHTY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

SIGNATURE:

CITY-ST 20°

14. I do hereby certify that the information supplied with this filing does not qualify to 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 chapter 3, or on an attachment with an address.

6.4 CiTY - ST - ZIP