

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

95 MAY -1 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000009886 (1)

1. Corporation Name

ANGELIC IMPRESSIONS CORPORATION

Principal Place of Business

% CYNTHIA L. CHIEFA
201 S. BISCAYNE BLVD., SUITE 880
MIAMI FL 33131

Mailing Address

4839 SW 148TH AVE
STE 328
DAVIE FL 33330

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or qualified

02/09/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0389659

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation has adopted the uniformed fees schedule 12/15/92/93

Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21. Suite Apt. # etc.

22. City & State

23. Zip

24. Country

25. State

26. City

27. Suite Apt. # etc.

28. City & State

29. Zip

30. Country

31. State

32. City

33. Suite Apt. # etc.

34. City & State

35. Zip

36. Country

37. State

38. City

39. Suite Apt. # etc.

40. City & State

41. Zip

42. Country

43. State

44. City

45. Suite Apt. # etc.

46. City & State

47. Zip

48. Country

49. State

50. City

51. Suite Apt. # etc.

52. City & State

53. Zip

54. Country

55. State

56. City

57. Suite Apt. # etc.

58. City & State

59. Zip

60. Country

61. State

62. City

63. Suite Apt. # etc.

64. City & State

65. Zip

66. Country

67. State

68. City

69. Suite Apt. # etc.

70. City & State

71. Zip

72. Country

73. State

74. City

75. Suite Apt. # etc.

76. City & State

77. Zip

78. Country

79. State

80. City

81. Suite Apt. # etc.

82. City & State

83. Zip

84. Country

85. State

86. City

87. Suite Apt. # etc.

88. City & State

89. Zip

90. Country

91. State

92. City

93. Suite Apt. # etc.

94. City & State

95. Zip

96. Country

97. State

98. City

99. Suite Apt. # etc.

100. City & State

101. Zip

102. Country

103. State

104. City

105. Suite Apt. # etc.

106. City & State

107. Zip

108. Country

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111. Suite Apt. # etc.

112. City & State

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117. Suite Apt. # etc.

118. City & State

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129. Suite Apt. # etc.

130. City & State

131. Zip

132. Country

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135. Suite Apt. # etc.

136. City & State

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138. Country

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141. Suite Apt. # etc.

142. City & State

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144. Country

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147. Suite Apt. # etc.

148. City & State

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150. Country

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153. Suite Apt. # etc.

154. City & State

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159. Suite Apt. # etc.

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162. Country

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165. Suite Apt. # etc.

166. City & State

167. Zip

168. Country

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171. Suite Apt. # etc.

172. City & State

173. Zip

174. Country

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177. Suite Apt. # etc.

178. City & State

179. Zip

180. Country

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183. Suite Apt. # etc.

184. City & State

185. Zip

186. Country

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189. Suite Apt. # etc.

190. City & State

191. Zip

192. Country

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195. Suite Apt. # etc.

196. City & State

197. Zip

198. Country

199. State

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201. Suite Apt. # etc.

202. City & State

203. Zip

204. Country

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206. City

207. Suite Apt. # etc.

208. City & State

209. Zip

210. Country

211. State

212. City

213. Suite Apt. # etc.

214. City & State

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220. City & State

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226. City & State

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250. City & State

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252. Country

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261. Suite Apt. # etc.

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267. Suite Apt. # etc.

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285. Suite Apt. # etc.

286. City & State

287. Zip

288. Country

289. State

290. City

291. Suite Apt. # etc.

292. City & State

293. Zip

294. Country

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murdum
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1995 MAY 1 PM 7:50

DOCUMENT # P93000010086 (5)

1. Corporation Name

WEST CORRIDOR PROJECTS, INC.

Principal Place of Business

9015 NORTHWEST 13 TERRACE
MIAMI FL 33172
US

Mailing Address

9015 NORTHWEST 13 TERRACE
MIAMI FL 33172
US

600001470926
-05/02/95--01095--001
****800.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/05/1993

3a. Date of Last Report

08/23/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0398866

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

7. This corporation has liability for intangible tax under S. 195.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

M AND W AGENTS INC.
9100 SOUTH DADELAND
SUITE 1707
MIAMI FL 33156

81 Name

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

83

84 City

FL

85 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 printed name of registered agent and title of corporation)

NOTE: Registered Agent signature required when terminating

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LEROY, JACQUES M
STREET ADDRESS	2435 FISHER ISLAND DR.
CITY, ST, ZIP	MIAMI FL 33109
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
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	☐ 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	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 the amendment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/1995

4/26/95