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

1	RPORATION UAL REPORT	FLORIDA DEPARI Sandra B. Secretary DIVISION OF CO	Mortham of State	
	MENT # P93000052	601		98 OCT 15 PM 2: 07
1. Colectation Name WESTEND DEVELOPERS, INC.				SECRETARY OF STATE TALLAHASSEE. FLORIDA
Principal Piac	ce of Business	Mailing Address		
2. Principal P	Place of Business	2a. Mailing Address		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 7/28/93 4. FEI Number Applied For
21 2240	Date Palm Road	26 2240 Date	Palm Road	d 65-0439022 Not Applicable
Suite, Apt 22		Suite, Apt #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
	Raton, FL	City & State 28 Boca Raton		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip 24 33432	Country 25 U.S. 9. Name and Address of Current		Country 30 U.S.	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent
81 Name MIChelle Reich 82 Street Address (P.O. Box Number is Not Acceptable) 2240 Date Palm Road 83 84 City Boca Raton FL 85 33 4 32 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 1 am lamitar with and accept the change of 10,000 Parica Statutes.				
SIGNATURE .	Signature Typed or printed name of registered agent			re required when renstating) DATE
12. TITLE NAME	D Saiz, Cesar	DIRECTORS DELETE	13. 11 TITLE 12 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DVT ODDIDES Addition
STREET ADDRESS	12320 N.W. 18 S Pembroke Pines.		1 3 STREET ADDRESS	-10/19/9801073008 8 ***1050.00 ***1050.00 W
TITLE	D	A DELETE	2 1 TITLE	DED Commiss and all the commissions are commissioned and commissions are commissioned and commissioned and commissioned are commissioned and commissioned and commissioned are commissioned are commissioned and commissioned are commissioned are commissioned are commissioned are commissioned and commissioned are commissioned and commissioned are commissioned and commissioned are c
NAME STREET ADDRESS	Reich, Stuart		2 2 NAME 2 3 STREET ADDRESS	Reich, Michelle 2240 Date Palm Road
CITY-ST-ZIP TITLE		☐ DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	Boca Raton, FL 33432
NAME, STREET ADDRESS CITY-ST-ZIP			3 2 NAME 3 3 STREET ADDRESS 3 4 CITY+ST-ZIP	REINSTATEMENT96-98
TITLE		DELETE	4 1 TITLE	Change LA Addition
STREET ADDRESS CITY+ST-ZIP			4 2 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	15-10/16
TITLE		☐ DELETE.	5 1 TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	
TIRE		CELETE	5.4 CHY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME			R _ NAME	
STREET ADORESS			64 GEY ST-ZIP	
14. I hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.				
SIGNATURE: Mischarup And Type Religion NAME OF SIGNING OFFICER OF DIRECTOR Mischarup And Type Religion President				