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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000069874 (4)

WEST ATLANTIC INVESTMENT GROUP, INC.

				10101 10131 10 1 31 1 0101 1001		
Principal Place of Business Mailing Address			a somtiemen rich schiam eiter adeite mitte muste mitte mitte ibret ibret ibret ibret biller ibet ibret.			
11185 MEDIAN STREET BOCA RATON FL 33428 US	11185 MEDIAN STREET BOCA RATON FL 33428 US		DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualified			
			10/01/1993			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		59-3207513	Not Applicable		
Suite, Apt. #, etc	Suite, Apt #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25	Zip 30	Country	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
VAN OPDORP, JAMES		81 Name				
11185 MEDIAN STREET BOCA RATON FL 33428			82 Street Address (P.O. Box Number is Not Acceptable)			

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

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office or re agent. I ar	egistered agent, or both, in the State of Flor in familiar with, and accept the obligations o	ida. Such change was a of, Section 607,0505, Flo	uthorized by the cor rida Statutes.	poration's board of directors. I hereby accept the	appointment as	registered
SIGNATURE	Signature, typed or product name of registered agon; and lift	e if applicable (NOTE	Rugistered Agent signature	e required when reinstating)	TE	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	SD	🔀 DELETE	1.1 TITLE		Change	☐ Addition
NAME	WIDEMAN, CLAY		1.2 NAME			
STREET ADDRESS	225 N.E. 21ST ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP]		
TITLE	PD	DELETE	2.1 TITLE	7/5/0	☐ Change	Addition
NAME	VAN OPDORP, JAMES		2.2 NAME	VAN OTDORP JAMES		
STREET ADDRESS	11185 MEDIAN ST.		2.3 STREET ADDRESS	11185 MEDIND ST.		
CITY-ST-ZIP	BOCA RATON FL		2 4 CITY-ST-ZIP	BOCA RATON FL 33428		
TITLE	D	DELETE	3.1 TITLE		Change Change	Addition
NAME)	WILBERT BROWN		3.2 NAME			,
STREET ADDRESS	10341 WEST TARA BLVD		3.3 STREET ADDRESS			
CITY - ST - ZIP	BOYNTON BEACH FL		3.4 CITY-ST-ZIP			
TITLE	D	≥ DELETE	4.1 TITLE		Change	Addition
NAME	CLARENCE JONES		4. 2 NAME			
STREET ADDRESS	1525 NE 1ST COURT		4.3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL		4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 City - St - ZiP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY OF 7ID			CACITY CT 7ID			i

14. Thereby 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 trusted 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.

SIGNATURE:

FILED

Apr 21 1998 8:00am

Secretary of State

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(561)432-3161