

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90168 019 ***158.75

DOCUMENT # P94000000288

1. Corporation Name

WESTON-BONAVENTURE INSURANCE & AUTO TAG, INC.

Principal Place of Business

P. O. BOX 5347
FT. LAUDERDALE FL 33310
US

Mailing Address

P. O. BOX 5347
FT. LAUDERDALE FL 33310
US

2. Principal Place of Business

21 4161 NW 5 Street
Suite, Apt. #, etc.

City & State

23 Plantation, FL

24 33317 25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

27 City & State
28 Zip Country
29 30317 30 USA

3. Date Incorporated or Qualified

01/03/1994

4. FEI Number

65-0468158

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$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

10. Name and Address of New Registered Agent

DOYLE, PATRICK D
4161 N.W. 5HT STREET
PLANTATION FL 33317

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TD
NAME LAWSON, EDWARD
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE SD
NAME SANDLER, ROBERT A.
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE PD
NAME LAWSON, MICHELE
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE D
NAME RAYMOND, RONALD A.
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE D
NAME KRAMER, BRUCE H.
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE D
NAME LEONARD, CARLA L.
STREET ADDRESS 2107 S ANDREWS AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33316

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

WESTON-BONAVENTURE INSURANCE AND AUTO TAGS, INC.

DOCUMENT #P94000000288

ATTACHMENT

149982-90/68-19

P#94000000288

ADDITIONS/CHANGES: Officers & Directors

- | | | |
|----|---|----|
| 1. | Kent M. Linder
4161 N.W. 5th Street
Plantation, FL 33317 | P |
| 2. | Patrick D. Doyle
4161 N.W. 5th Street
Plantation, FL 33317 | SD |
| 3. | Michele V. Lawson
4161 N.W. 5th Street
Plantation, FL 33317 | TD |
| 4. | Edward J. Lawson
4161 N.W. 5th Street
Plantation, FL 33317 | D |
| 5. | Ronald A. Raymond
4161 N.W. 5th Street
Plantation, FL 33317 | D |
| 6. | Carla L. Leonard
4161 N.W. 5th Street
Plantation, FL 33317 | D |
| 7. | Bruce F. Simberg
4161 N.W. 5th Street
Plantation, FL 33317 | D |
| 8. | Joseph A. Epstein
4161 N.W. 5th Street
Plantation, FL 33317 | D |

DELETIONS: Officers & Directors

- | | | |
|----|--|----|
| 1. | Robert A. Sandler
2107 South Andrews Ave
Fort Lauderdale, FL 33316 | SD |
| 2. | Bruce H. Kramer
2107 South Andrews Ave
Fort Lauderdale, FL 33316 | D |