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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000019920 (5)

1. Corporation Name

WESTERN INVESTORS, INC.



Principal Place of Business

Mailing Address

7001 SW 18TH ST  
STE. 302C  
PLANTATION FL 33317  
US

7001 SW 18TH ST  
STE. 302C  
PLANTATION FL 33317  
US

2. Principal Place of Business

2a. Mailing Address

21 7001 SW 18th St

26 7001 SW 18th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State  
23 Plantation, FL

27 City & State  
28 Plantation, FL

24 33317 25 USA

29 33317 30 USA

9. Name and Address of Current Registered Agent

RUBINCHIK, HARVEY L  
1776 N. PINE ISLAND ROAD  
STE. 118  
PLANTATION FL 33322

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's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME GLUSMAN, MICHAEL  
STREET ADDRESS 7001 S.W. 18TH STREET  
CITY-ST-ZIP PLANTATION FL

☐ DELETE

TITLE D  
NAME LIEBERMAN, MITCHELL  
STREET ADDRESS 517 S.W. 168TH WAY  
CITY-ST-ZIP FORT LAUDERDALE FL 33326

☐ DELETE

TITLE VP  
NAME COHEN, EDWARD E.  
STREET ADDRESS P O BOX 2911-98  
CITY-ST-ZIP DAVIE FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/96 (305) 792-4911  
Date Daytime Phone #

CR2E034 (12/95)