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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P94000058314

1. Corporation Name WESTLAND MOBILE HOME PARK INC.

FILED 99 APR 30 PM 4:08 TALLAHASSEE, FLORIDA



Principal Place of Business POST OFFICE BOX 55870 MIAMI FL 33255 US Mailing Address POST OFFICE BOX 558703 MIAMI FL 33255

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/08/1994 4. FEI Number 65-0538108 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 8. This corporation owes the current year Intangible Personal Property Tax [] Yes [] No 10. Name and Address of New Registered Agent

2. Principal Place of Business 2a. Mailing Address 21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc. 22. City & State 27. City & State 23. Country 28. Zip 24. Country 29. Zip 30. Country

9. Name and Address of Current Registered Agent AMERILAWYER CHARTERED C/O LAWRENCE J. SPIEGEL 343 ALMERIA AVENUE CORAL GABLES FL 33134

81. Name Spiegel & Utrera, P.A. 82. Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue 83. City Coral Gables FL 85. Zip Code 33134

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 the provisions of Section 607.0505, Florida Statutes. SIGNATURE By: Natalia Utrera, Vice-President DATE 4/29/99

Table with 2 columns: Officers and Directors (12) and Additions/Changes to Officers and Directors (13). Includes names like Gonzalez, Maria and Granador, Moises.

700002868207-05/07/99-01137-011 ***150.00 ***150.00

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 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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/29/99 Daytime Phone #

CR2E034 (11/98)