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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

P94000065582 (6)

WESTMINSTER FINISHING, INC.

Principal Plac	e of Business	Mailing Address			I OBILI BULIB OLIO I BILO BILO 1918 1918 1911
SW 7TH AV SUITE 1536 POMPANO US		1239 SW 74TH AVE. NORTH LAUDERDALE FL US	33068	DO NOT WRIT 3. Date Incorporated or Qualified	E IN THIS SPACE
				09/07/1994	
1.1./N	lace of Business	2a, Mailing Address	ich, AVE	4. FEI Number	Applied For
21 440	0 1000 let vic		Tole, ANE	65-0566835	Not Applicable
Suite, Apt.	E D	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	IND BEALLY 16-	City & State 28 CUMPANO ()		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3300	Country USA	zip 33064 30	Country OS A	This corporation owes or has p Personal Property Tax due Jun	
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
l N	NOTT, CHRISTOPHER		81 Name	NOTE CHRISTOPHEN	
1239 SW 74TH AVE NORTH LAUDERDALE FL 33068			Street Address (P.O. Box Number is Not Acceptable) 44400 Now 1971 AVENNOC.		
			83 5018	D	
1				MPANO BEACH	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	~ • •	WII	LI 62		06-21-98
SIGNATURE	Signature, typed or printed name of registered agent		legistored Agent-eignature req		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
titlé name	PVT NOTT, CHRISTOPHER	L_ DELETE	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	1239 SW 74TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	8	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	NOTT, ANDREA		2.2 NAME		
STREET ADDRESS	1239 SW 74TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH LAUDERDALE FL	T priest	2 4 CITY-ST-ZIP		Observed Tables
TITUE		L_ DELETE	3.1 TITLE		L] Change L Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 Title		☐ Change ☐ Addition
NAME	-		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		1 00,000	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 TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

CITY-ST-ZIP

· 医乳腺 一个形式,他一定需要转移的影响,这个话,那种比较级的影响,这种感觉是我感觉是是在这一

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 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.

011-21-92 954-969-1200

FILED

Apr 28 1998 8:00am

Secretary of State