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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000080216

 Corporation 	n Name	· • • • • • • • • • • • • • • • • • • •	•						
WESTMA	ARK CONSTRUCTION, INC.								
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				•					
Principal Place of Business Mailing Address							B ill Br idi Buidi (Bill		IFBAR BIFF IBBI
916 E. PARK A		916 E. PARK A	AVF						
TALLAHASSEE FL 32308 TALLAHASSEE FL 32308					DO NOT WRITE IN THIS SPACE			,	
		•						ACE	•
						3. Date Incorporated or Qualifed			
						11/01/1994			
2. Principal P	lace of Business	2a. Mailing Ad	ddress			4. FEI Number		<u> </u>	plied For
21		26				59-3278347			t Applicable
Suite, Apt.	#, etc.	Suite, Apt.	. #, etc.			5. Certifcate of Status Desired		8.75 A Fee Re	
22		27							
City & Stat	le ·	City & Sta	II O			6. Election Campaign Financing		\$5.00 Added to	
23	Country	Zip		Country	 -	Trust Fund Contribution			0 1 665
Zip	Country			30		This corporation owes the cur Personal Property Tax.			□No ·
24	9. Name and Address of Curren	29	nt .	1301		10. Name and Address of New			
	9. Name and Address of Curren	it Registered Ager		81	Name	TO. THE HE WITH A STATE OF THE			,
ROD	DRIQUE, MARK								
	E. PARK AVE.			82	Street Add	dress (P.O. Box Number is Not Accept	able)		•
	LAHASSEE FL 32301			83				3	17, 17
								<u></u>	
				84	City		FL	35 Zip C	Code"
				1 1				poing its	registered
44	A Abo municione of Contions 607 050	12 and 607 1509 El	orida Statut	tee the above	named cor	rnoration submits this statement for the	: burbose of cha		
office or r	registered agent, or both, in the State.	of Florida, Such ch	iande was a	luthorized by t	-named cor he corporat	rporation submits this statement for the tion's board of directors. I hereby acce	pt the appointment	ent as reg	gistered
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such ch	iande was a	luthorized by t	-named cor he corporat	rporation submits this statement for the tion's board of directors. I hereby acce	pt the appointment	ent as reç	gistered
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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 or an attachment with an address, with all other like empowered.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-99

222-57/3

Daytime Phone #