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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400080611 (4)

WEST LAKE GARDENS VII, INC. Principal Place of Business Mailing Address 15123 NW 87TH PLACE 15123 NW 87TH PLACE MIAMI FL 33016 MIAMI FL 33016 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0560766 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Country 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MENENDEZ, JUAN M 15123 NW 87TH PL Street Address (P.O. Rox Number is Not Accentable) - . **MIAMI FL 33018** 83 City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DPST DELETE 1.1 TITLE Change Addition TITLE MENENDEZ, JUAN M 1.2 NAME NAME 15123 NW 87TH PLACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition MENENDEZ, JOSE A NAME 2.2 NAME 15122 NW 87TH CT STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2.4 City-S1-ZiP CITY-ST-ZIP DELETE \_\_ Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4, CITY-ST-7IP CITY - \$1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - ST - ZiP CITY-ST-7IP ☐ DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CHY-S1-ZIP 54 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 affactment with an address.

SIGNATURE:

CHY-ST-7IE

Mulan

1/6/98 826-8929

FILED

Jan 16 1998 8:00am

Secretary of State