

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

FILED  
Feb 03 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000033058 (5)

1. Corporation Name

DDB WEST PALM, INC.

Principal Place of Business

Mailing Address

~~512 EAST TALL OAKS DR~~  
~~PALM BEACH GARDENS FL 33410~~  
~~US~~

~~512 EAST TALL OAKS DR~~  
~~PALM BCH GARDENS FL 33410~~  
~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/24/1995

4. FEI Number

65-0597054

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 118 Serrille Road

Suite, Apt. #, etc.

22 City & State

23 West Palm Beach, FL

24 Zip

33405

25 Country

US

2a. Mailing Address

26 118 Serrille Road

Suite, Apt. #, etc.

27 City & State

28 West Palm Beach, FL

29 Zip

33405

30 Country

US

9. Name and Address of Current Registered Agent

DIOP, ROBERT

~~512 EAST TALL OAKS DR~~

~~PALM BCH GARDENS FL 33410~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

118 Serrille Road

83

84 City

West Palm Beach

FL

85 Zip Code

33405

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

P  
DIOP, ROBERT  
512 EAST TALL OAKS DR.  
~~PALM BEACH GARDENS FL~~

TITLE NAME ☐ DELETE

D  
LAVIELLE, DANY GUY  
512 EAST TALL OAKS DR  
PALM BEACH GARDENS FL

TITLE NAME ☐ DELETE

S  
BASSAISTEQUY, PIERRE  
2009 BRIDWAY BLVD.  
SAUSALITO CA

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 118 Serrille Road

1.4 CITY-ST-ZIP West Palm Beach, FL 33405

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 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 attachment with an address.

SIGNATURE:

CR2E034 (10/97)