PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500038601

WEST COAST MORTGAGE HOLDINGS, INC.

Principal Place of Business Mailing Address
760 NW 107TH AVE 760 NW 107TH AVE

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90246 020 ***150.00



760 NW 107TH MIAMI FL 33172 US		760 NW 107TH AVE Miami FL 33172 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/16/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number . Applied For
21		26			65-0626123 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			$\overline{}$		\$8.75 Additional
abuite 300 and suite 30					5. Certificate of Status Desired Fee Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees -
Zip 24	Country	Zip 3	Count	у	8. This corporation owes the current year Intangible Personal Property Tax. ☐ No
	g, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
			8	1 Name	a
RUBIN, SHELLY			8	2 Street	et Address (P.O. Box Number is Not Acceptable)
760 NW 107TH AVE				5	wite 300
MIAN	N FL 33172		8	3	
			8	4 City	85 Zip Code
					FL 1
11. Pursuant office or nagent. I as	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the obligations.	ations of, Section 607.0303, Florid	ia Statute	15.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag-		legistered Ag	ent signature	e required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DCEO	☐ DELETE	1.1 TITLE		☐ Change Addition
NAME	SAIONTZ, STEVEN J		1.2 NAME	Ē	- · d - · · · · · · ·
STREET ADDRESS	760 NW 107THA VE		1.3 STRE	ET ADDRESS	s Suite signed
CITY-ST-ZIP	MIAMI FL 33172		1.4 CITY	ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE		Change D Addition
NAME	MILLER, LEONARD		2.2 NAME	Ē	James of the state
STREET ADDRESS	760 NW 107TH AVE		2.3 STRE	ET ADDRESS	S TOO NWTOTHUE
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CITY	-ST-ZIP	
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change · ☐ Addition
NAME	RUBIN, SHELLY		3.2 NAMI	.	
STREET ADDRESS	760 NW 107TH AVE			ET ADDRESS	s Sute 300
			3.4. CITY		
CITY-ST-ZIP	MIAMI FL 33172	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JORDAN, MARGARET	<u> </u>	4. 2 NAM		
	760 NW 107TH AVE			= ET ADDRES	s Suite 300
STREET ADDRESS	T 17		4.4 CITY		aure or
CITY-ST-ZIP TITLE	MIAMI FL 33172	DELETE	5.1 TITLE		AC Lange Addition
NAME	AS MOMOVIE IT		5.2 NAM		TO STATE OF THE ST
-	MCMICKLE, J.T.			ET ADDRES	S HRNETT, PETH-HAY
STREET ADDRESS	760 NW 107TH AVE		5,4 CITY		AS ARNETT, PETA-GAY Swite 300
CITY-ST-ZIP	MIAMI FL 33172	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE	DC		6.2 NAMI		
NAME	MILLER, STUART A.		1	- ET ADDRES	
STREET ADDRESS	760 NW 107TH AVE				
CITY, ST. 7ID	MIAMI EL 33170		6.4 CITY	-ST-ZIP	I

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 attactment with an address, with all other like empowered.

SIGNATURE

MARGARET JORDAN, TREAS.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99

305 485 2000:

CR2E034 (11/9