SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P95000038756 (9) WESTBERRY ENTERPRISES, INC. Principal Place of Business Mailing Address 4251 S.W. 105 AVENUE 4251 S.W. 105 AVENUE FT. LAUDERDALE FL 33328 FT. LAUDERDALE FL 33328 3. Date Incorporated or Qualified 3a. Date of Last Report 05/15/1995 2. Principal Place of Business 2a. Mailing Address 4 FEL Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Flection Campaign Financing 23 28 Trust Fund Contribution Added to Fees 2_{ip} Country Zin Country This corporation has liab lity for intangible tax under s. 199.032 24 25 29 30 Yes [] No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WESTBERRY, PAUL A III 4251 S.W. 105 AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33328 83 Ř4 City Zip Code l 85 l FL 11. Pursuant to the provisions of Sections 607 0502 and 607,1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its 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, am familiar with, and accept the obligations of, Section 607,0505, Florido Statutes. **SIGNATURE** Signature, typical or prints a name of registered agent and little if applicable INOTE. Bog-nered Agent signature required when reinstating OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8) TITLE DELETE 1.1 TITLE Charge Addition NAME WESTBERRY, PAUL A III 1.2 NAME CR2E034 STREET ADDRESS 4251 S.W. 105 AVENUE 13 STREET ADDRESS FT. LAUDERDALE FL 33328 CITY-ST-ZIP 14 CHY-ST ZIP TITLE DELETE 211006 Change Addition NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE ____ Change ____ Add te: NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 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 54 City - ST- ZIP TITLE DELFTE 6 ! TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-SI-ZIP 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 legisl effect as a made under oath, that I am an office or or orector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address

OFFICER OR DIRECTOR

SIGNATURE: