

FILE NOW: FILING FEE AFTER MAY 1 IS \$650.00

FILED  
Apr 03 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P95000058955</b> 1. Corporation Name  <b>WEST FAIRFAX CENTER OUTPARCEL, INC.</b>			
2. Principal Place of Business <b>C/O THE SILVERMAN ORGANIZATION 3612 HILLSBORO DRIVE DEERFIELD BEACH, FL 33442</b>		3. Date Incorporated or Qualified <b>07/27/95</b>	
2a. Mailing Address <b>C/O SILVERMAN ORG.</b>		3a. Date of Last Report <b>12/31/96</b>	
21 4090 JERMANTOWN ROAD Suite, Apt. #, etc.	26 C/O SILVERMAN ORG. Suite, Apt. #, etc.	4. FEI Number <b>65-0611429</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
22 City & State <b>FAIRFAX, VIRGINIA</b>	27 3612 HILLSBORO BLVD. City & State <b>DEERFIELD BEACH, FL</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
23 Zip <b>22030</b>	28 Zip <b>33442</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
24 Country <b>USA</b>	29 Country <b>USA</b>	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent  <b>JILL HUNTER, PRESIDENT</b> <b>C/O THE SILVERMAN ORGANIZATION</b> <b>3612 HILLSBORO BLVD.</b> <b>DEERFIELD BEACH, FLORIDA 33442</b>		10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City <b>FL</b> 85 Zip Code	
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 607.0506, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PRESIDENT/DIRECTOR</b> <input type="checkbox"/> DELETE NAME <b>JILL HUNTER, 3612 HILLSBORO BLVD.</b> STREET ADDRESS <b>DEERFIELD BEACH, FLORIDA 33442</b> CITY - ST - ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>000002479218</b> <b>-04/06/98--01011--030</b> <b>***165.00</b>	
14. I do 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: <i>Jill Hunter</i>		JILL HUNTER	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <b>3/29/98</b>	Daytime Phone # <b>617-928-1266</b>

CR2E034 (9/96)