FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthami Secretary of State

1	1996	DIVISION O	F CORPORATIONS		
DOCUN 1. Corporation	MENT # P9500	00094893 (1	1)		
•	WESTMENTS INC.	·	•	A SECURE OF SHIP SHIP SHIP SECURE AND SECURE	
Principal Place of Business		Maling Address		s charicher cha harar arrer aberr attire bank duber	A INCOME THE STATE OF SECULAR
712B DUVAL STREET KEY WEST FL 33010		712B DUVAL STREET KEY WEST FL 33040			
				· · · · · · · · · · · · · · · · · · ·	Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		12/14/1995 4. FEI Number	Applied For
:1		26		65-0635320	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3	T	28	on of the second	Trust Fund Contribution	Added to Fees
Ζιρ 4	Country 25	Zip (29)	Gountry 30	8. This corporation has liability for intangible Florida Statutes Yes No.	
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Register	ed Agent
			81 Name		
4521 PG	VATE CREATIONS ENTERPRISI A RIVO	ES, INC.	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SUITE 21			83		
Palm be	EACH GARDENS FL 33418		84 City	_	85 Zip Code
11 Durement to	the provisings of Sections 607.0%	29 and 607 1509 Findin Styl	too the above paying some	ration submits this statement for the purpose of	shancing its registered office.
or registere	ed agent, or both, in the State of Fic h, and accept the obligations of, Sc	irida. Such change was author	ized by the conjoration's boa	railori sobinits this statement for the purpose of ird of directors. Thereby accept the appointmen	t as registered agent. Lani
SIGNATURE	n, and doopt the obligations of, oc	Charles and Charles Stated			
·	Signatine typed or printed name of registered age		WHE Registerial April Speakers to pro-		
12. TITLE	D OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	BERNHARDT, MICHAEL		1 2 NAME		_ country (newson
STREET ADDRESS	% 712B DUVAL STREET		1.3 STREET ADDRESS		
CHTY - ST - ZIP	KEY WEST FL 33040	E proper	14 CI `Y - S1 - ZIP		
TITLE NAME		DELETE	2 * 1011 F 2 2 NAME		Change Addition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2.4 CITY - \$1 - ZiP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS CITY+ST-ZIP			3.3 STREET ACORESS 3.4 City - St - Zip		
Titie		☐ DELFTE	4.1 TITLE		Change Addition
NAME			. 4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		☐ DELETE	4.4 City - St - Zif 5.1 Title		Change Addition
NAME			5 2 NAME		C o larige C Habitien
STREET ADORESS			5 3 STHEET ADORESS		
CITY - ST - ZIP		<u></u>	5.4 C(TY - ST - Z(P)		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME		
CITY - ST - ZIP			6 3 STREET ADORESS 6 4 CITY-ST-ZIP		
14. I do hereb			mished and does not qualify	for the exemption stated in Section 119.07(3)(k)	
oath, that I	Lam an officer or director of the con	poration or the receiver or trus	tee empowered to execute th	ato and that my signature shall have the same k iis report as required by Chapter 607, Florida St	
appears in	Block 12 or Block 13 if changed o	r on an attachment with an ad		_ // /	
SIGNAT	URE: MAY	Efen Y	Michael Benn	MRE 4/29/96 (3	65)450196
	SIGNATURE AND TYPED	OR PRINTED NAME OF SIGNING OFFI	CER OR DIRECTOR	The Man Market	Dayto e Phase #