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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025868

WESTWOOD PROPERTIES, INC.

Principal Place	e of Business	Mailing Address						
5382 CRAWFORDVILLE RD 5382 CRAWFORDVILLE RD								
TALLAHASSEE FL 32310 TALLAHASSEE FL 32310						DO NOT WRITE IN	THIS SPACE	
US US						3,_Date Incorporated or Qualifed		
			_			03/22/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For
21 26						65-0655698	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional
22 27						5. Certifcate of Status Desired	Fee Re	quired
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Co	ountry		8. This corporation owes the current ye	ear Intangible	
24	25	29	30			Personal Property Tax.	☐ Yes	No
	9. Name and Address of Cur	rent Registered Agent		\perp		10. Name and Address of New Regis	tered Agent	
				81	Name			
	HAMZA, RAJA			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
) N.W.80TH AVENUE				000000			
LAUI	DERHILL FL 33351			83				
				-	0.4	<u> </u>	85 Zip 0	Code
				84	City		FL 85 Zip C	5000
office or r	to the provisions of Sections 607.6 registered agent, or both, in the Stam familiar with, and accept the obline	ate of Florida. Such change wa	s authoriz	ea by	the corporati	poration submits this statement for the purp- ion's board of directors. I hereby accept the	ose of changing its appointment as re	registered gistered
agent. I a	im familiar with, and accept the ob-	ligations of, Section 607.0303,	riolida St	atutes	•			
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (N	OTE: Register	ed Agen	t signature require	ed when reinstating)	ATE	
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	R\$ IN 12
TITLE	P	☐ DELETE	1.1	TITLE			Change	☐ Addition
NAME .	BENHAMZA; RAJA		1.2	NAME				}
STREET ADDRESS	AGGG ALLEY GOTTLE ALIT		1.3	STREET	ADDRESS			
CITY-ST-ZIP	LAUDERHILL FL 33351		1.4	CITY-S'	r-zip			\
TITLE	E TOPETA NEC 1 E GOOT	☐ DELETE		TITLE			☐ Change	☐ Addition
NAME			2.2	NAME				ļ
STREET ADDRESS			2.3	STREET	ADDRESS			
	į			CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE		TITLE			☐ Change	Addition
NAME		_	32	NAME				{
STREET ADORESS					ADDRESS			
-	Ì			CITY-S				
CITY-ST-ZIP	 	☐ DELETE		TITLE			☐ Change	Addition
NAME	·	<u> </u>		NAME	•	-		1
					T ADDRESS			
STREET ADDRESS				CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE		TITLE	r-411		☐ Change	☐ Addition
				NAME			•	,
NAME					ADORESS			
STREET ADDRESS				CITY-S	1			
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,	DELETE		TITLE	-		☐ Change	Addition
TITLE	1 100		- 1	NAME			_ ,	_
NAME		Maria Caralla			TADDRESS			
STREET ADDRESS	d .		J.J					

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

May 04, 1999 8:00 am Secretary of State

05-04-1999 90137 033 ***150.00

CR2E034 (11/98)