

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

**FILED**

**Feb 17 1997 8:00am  
Secretary of State**

PROFIT CORPORATION  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P96000052692 (6)**

1. Corporation Name  
**WEST BOC MARKETING, INC.**



Principal Place of Business	Mailing Address
<b>C/O DENNIS G. BRITTEN 2200 NW CORPORATE BLVD. SUITE 210 BOCA RATON FL 33431</b>	<b>C/O DENNIS G. BRITTEN 2200 NW CORPORATE BLVD. SUITE 210 BOCA RATON FL 33431-7307</b>

3. Date Incorporated or Qualified <b>06/19/1996</b>	3a. Date of Last Report
4. FEI Number <b>65-0697343</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 <b>21065 Powerline Road</b>	26 <b>21065 Powerline Road</b>
Suite, Apt. #, etc. 22 <b>Suite 2-A</b>	Suite, Apt. #, etc. 27 <b>Suite 2-A</b>
City & State 23 <b>Boca Raton, FL</b>	City & State 28 <b>Boca Raton, FL</b>
Zip Country 24 <b>33433</b> 25 <b>Palm Beach</b>	Zip Country 29 <b>33433</b> 30 <b>Palm Beach</b>

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>BRITTEN, DENNIS G 2200 NW CORPORATE BLVD SUITE 210 BOCA RATON FL 33431</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	<b>21065 Powerline Road</b>
		83	<b>Suite 2-A</b>
		84 City	<b>Boca Raton</b>
		85 Zip Code	<b>FL 33433</b>

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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>P,D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BRITTEN, DENNIS G</b>	1.2 NAME	
STREET ADDRESS	<b>2200 NW CORPORATE BLVD STE 210</b>	1.3 STREET ADDRESS	<b>9800 N.W. 48th Court</b>
CITY-ST-ZIP	<b>BOCA RATON FL 33431</b>	1.4 CITY-ST-ZIP	<b>Coral Springs, FL 33075</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Dennis G Britten* **2/11/97** 561/852-1445  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)