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FILED
Mar 26 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 # P96000075420 (5)

1. Corporation Name
WESTSHORE HOLDINGS INC.



Principal Place of Business

8041 CYPRESS ST.
TAMPA FL 33607

Mailing Address

8041 CYPRESS ST.
TAMPA FL 33607-3803

3. Date Incorporated or Qualified 09/11/1996	3a. Date of Last Report
4. FEI Number 59-3405147	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 500 N. Westshore Blvd	26 500 N. Westshore Blvd
22 Suite, Apt. #, etc. Suite 405	27 Suite, Apt. #, etc. Suite 405
23 City & State Tampa, FL	28 City & State Tampa, FL
24 Zip 33609	29 Zip 33609
25 Country	30 Country

9. Name and Address of Current Registered Agent

MORA, OSWALDO J
2050 CORAL WAY, STE. 402
MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name
FRANK G. CISNEROS
82 Street Address (P.O. Box Number is Not Acceptable)
500 N. Westshore
83 Suite 405
84 City
T
85 Zip Code
FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12.		<input type="checkbox"/> DELETE
TITLE	D	
NAME	CISNEROS, FRANK	
STREET ADDRESS	8041 CYPRESS ST.	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.1 TITLE	Director, President	
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Henry Perez	
2.3 STREET ADDRESS	500 N. Westshore Suite 405	
2.4 CITY-ST-ZIP	Tampa, FL 33609	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(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 in an attachment with an address.

SIGNATURE

CR2E034 (9/96)