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May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000010479 (8)

1. Corporation Name
WESTCAP FINANCE CORP.

Principal Place of Business
200 SOUTH BISCAYNE BLVD.
SUITE 4550
MIAMI FL 33131

Mailing Address
200 SOUTH BISCAYNE BLVD.
SUITE 4550
MIAMI FL 33131



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 200 S. Biscayne Blvd

22 4550

23 Miami, Florida

24 33131 U.S.A.

2a. Mailing Address

26 200 S. Biscayne Blvd

27 4550

28 Miami, Florida

29 33131 U.S.A.

3. Date Incorporated or Qualified

01/29/1997

4. FEI Number

65-0727526

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STULA, GREGORY
416 GARLEDA AVE
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name GORDON P. STULA
82 Street Address (P.O. Box Number is Not Acceptable)
888 Brickell Key Drive, #510
83
84 City Miami FL 85 Zip Code 33131

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)

4/23/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President, Secretary, Director ☐ Change ☒ Addition
1.2 NAME Gregory C. Stula
1.3 STREET ADDRESS 416 Garlelda Avenue
1.4 CITY-ST-ZIP Coral Gables, FL 33134

2.1 TITLE Vice-President, Treasurer, Director ☐ Change ☒ Addition
2.2 NAME Gordon P. Stula
2.3 STREET ADDRESS 888 Brickell Key Drive, #510
2.4 CITY-ST-ZIP Miami, FL 33131

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE M. P. Stula

CR2E034 (10/97)