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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000051847 (6)

WEST BOCA DEVELOPMENT, INC.

## **FILED** Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2255 GLADES RD., STE. 301E BOCA RATON FL 33431 2255 GLADES RD., STE. 301E **BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/11/1997 28. Mailing Address 26 N99 W. Palmetto Park Road 2. Principal Place of Business Applied For 1499 W. Palmetto Park Road Not Applicable \$8.75 Additional 5. Certificate of Status Desired Suite 200 Fee Required \$5.00 May Be 6. Election Campaign Financing Plorida Horida Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name KODSI, DANIEL 2255 GLADES RD., STE. 301E ss (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** вз 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE NAME KODSI, DANIEL 1.2 NAME 1499 w. Palmetto Park Road, Suite 200 Boxa Raton Florida 33486 2255 GLADES RD., STE. 301E STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33431** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 701 6 MAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 supplements arrived 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 true ready or trusters 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 attainment with an address.

SIGNATURE:

GOL347-6844