PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

Annual Report
1999-2000
UBR

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 NOV 14 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000022027

1. Corporation Name

WESTWARD EXPANSION, INC.

Principal Place of Business	Mailing Address
2100 SALZEDO AVENUE CORAL GABLES, FL 33134	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
2100 SALZEDO STREET	2100 SALZEDO STREET
Suite, Apt. #, etc. SUITE 300	Suite, Apt. #, etc. SUITE 300
City & State CORAL GABLES, FL	City & State CORAL GABLES, FL
Zip / Country 33134 / Miami-Dade	Zip / Country 33134 / Miami-Dade

4. Date Incorporated or Qualified To Do Business in Florida: 03/09/1998

5. FEI Number: 65-0817646 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	CARLOS ARAZOZA	2100 SALZEDO STREET SUITE 300	CORAL GABLES, FL 33134
P	CARLOS F. ARAZOZA	2100 SALZEDO STREET SUITE 300	CORAL GABLES, FL 33134
VP	ADELAIDA FERNANDEZ-FRAGA	2100 SALZEDO STREET SUITE 300	CORAL GABLES, FL 33134
S	JOSE MARTINEZ	2100 SALZEDO STREET SUITE 300	CORAL GABLES, FL 33134
T	MARIA CHACON	2100 SALZEDO STREET SUITE 300	CORAL GABLES, FL 33134
			300003491238 3 -12/08/00--01012--015 ****300.00 ****300.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
ARAZOZA COMAS DE TORRES & FERNANDEZ FRAGA 2100 SALZEDO AVENUE CORAL GABLES, FL 33134	Name: ARAZOZA & FERNANDEZ-FRAGA, P.A. Street Address (P.O. Box Number is Not Acceptable): 2100 SALZEDO STREET Suite, Apt. #, Etc.: SUITE 300 City: CORAL GABLES, State: FL, Zip Code: 33134

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent _____ Date November 13, 2000

REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: _____ Nov. 13, 2000 (305)444-6226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

Adelaida Fernandez-Fraga

2-82

WESTWARD EXPANSION, INC.
DOC.#P98000022027

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT .

CORDIALLY,

ADELAIDA FERNANDEZ-FRAGA
PRESIDENT