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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## May 01, 1999 8:00 am Secretary of State

05-01-1999 90062 050 \*\*\*150.00

## DOCUMENT # P98000035562

WESTHEM PROCUREMENT, INC.

Principal Place of Busine	SS
---------------------------	----

TITLE

NAME

STREET ADDRESS

Mailing Address

19050 WENTWO MIAMI FL 3301		19050 WENTWORTH DRIVE MIAMI FL 33015			DO NOT WRIT	E IN THIS	SPACE		
					3. Date Incorporated or Qualifed 04/20/1998				
2. Principal P	Place of Business Park	2a. Mailing Address		_	4. FEI Number		/	Applied For	
27 AIRPORT PLAZA Office 26 AIRPORT PLAZA C			$\mathcal{M}$	ce Bal	050827895		1	Vot Applicable	
Suite, Apt. #, etc. 7370 Av. w. 304 Street Suite, Apt. #, etc. 7370 A			₩.	36th Street	5. Certifcate of Status Desired		• -	Additional	
22 Suite 220G 27 Suite 220G					0. 00			Required	
City & State City & State					6. Election Campaign Financing		•	May Be	
23 110	Country	Zip Co	ountry	<del></del>	Trust Fund Contribution			to Fees	
20 3 V	00 25 () S A		) () . <u> </u>	<u> </u>	This corporation owes the curre Personal Property Tax.	int year into	angibie ☑ Yes	□No	
24 3 3 1	9. Name and Address of Current	1 <u></u>	Ť	<u> </u>	10. Name and Address of New R	egistered			
<u> </u>			81	Name		-			
	INEGIETER, MICHAEL R		82	Ctract Add-	ess (P.O. Box Number is Not Accepta	hle)			
	50 WENTWORTH DRIVE		02		ess (P.O. Box Number is Not Accepta		B		
MIAI	MI FL 33015		83						
			84	City			85 Zip	p Code	
ļ			1	. 77:0	17;	FL	.   13	315d	
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						DATE		———	
12.	Signature, typed or printed name of registered agent a OFFICERS AND			signature required	ADDITIONS/CHANGES TO OFF		ID DIRECT	TORS IN 12	
TITLE	VD		TITLE	1	ADDITIONS/OFFAROES TO SEE	102/10/11	☐ Change		
NAME	CANNEGIETER, MICHAEL R	1.2	NAME						
STREET ADDRESS	JOSES INCHITING DELL DONNE	1.3:	STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33015		CITY-ST						
TITLE		☐ DELETE 2.1	TITLE				Change	e	
NAME		2.2	NAME					ţ	
STREET ADDRESS		2.3	STREET	ADDRESS				{	
CITY-ST-ZIP		2.4	CITY-ST	T-ZIP					
TITLE .		_ DELETE 3.1	TITLE	-		~	☐ Change	e 🗌 Addition	
NAME		3.2	NAME	Į					
STREET ADDRESS	· .	3.3	STREET	ADORESS					
CITY-ST-ZIP			CITY-ST	r-zip		<del>_</del>			
πιέ			TITLE				☐ Change	e	
NAME			NAME				•	ĺ	
STREET ADDRESS	N 3	1	-	ADDRESS					
CITY-ST-ZIP			CITY-ST	-ZIP			Change	e 🗀 Addition	
TITLE			TITLE NAME					- L'Addition	
NAME	·			ADDRESS .	<u>-</u>				
STREET ADDRESS	1		CITY-ST						
CITY-ST-ZIP			TITLE				☐ Change	e	

CITY-ST-ZIP 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP