PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000048762

1. Corporation Name

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90018 032 ***150.00

WEST LAKES PROPERTIES REALTY, INC.												
Principal Place	e of Business	Mailing	Address		_			()(86)((80 ()) V ()			()	
15770 S.W. 42ND TERRACE 15770 S.W. 42ND TERRACE												
MIAMI FL 33185 MIAMI FL 33185							DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed	I IN IMISS	PAUE			l
		-					06/01/1998			A 1*	- 15	
· ·	lace of Business	<u> </u>	ling Address				4. FEI Number 65 · 084 0189				ed For	
21	#	26	Suite, Apt, #, etc.				6> 0840187 Not Applic \$8.75 Addition					
Suite, Apt.	#, etc.	├ ─	_				5. Certifcate of Status Desired		*	Requ		
City & State	a	27 	& State	====	==		6 Election Campaign Financing		\$5	00-м	av Re	
23		28					Trust Fund Contribution		-	led to	•	
Zip	Country	Zip		Coun	itry		8. This corporation owes the curr	ent year Inta	ngible			
24	25	29	. 3	30			Personal Property Tax.		Yes		No	
	9. Name and Address of Current						10. Name and Address of New F	Registered A	gent			
LANI	Drian, Luis O			L		Name						
15770 S.W. 42ND TERRACE				82	Street Addre	ass (P.O. Box Number is Not Accept	able)					
MAN	Al FL 33185				83							
						City		FL		Zip Co		
11. Pursuant office or ragent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligat	tions of, Sec	tion 607.0505, Florid	da Statu	tes.			purpose of copt the appoint	hanging tment a	g its re s regis	gistered stered	
	Signature, typed or printed name of registered agent			1	Agent s	signature required	ADDITIONS/CHANGES TO OF		DIDE	^TAR	S IN 12	3
12.	OFFICERS ANI	D DIRECTO	DELETE	13.			ADDITIONS/CHANGES TO OF	FICERS AND	Chai		Addition] :
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NAME STREET ADDRESS	vstd Landrian, yvonne		☐ DELETE	1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM	REET A Y-ST-2 LE ME		· .		_ Cha	nge	Addition	
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	vstd Landrian, yvonne		□ DELETE	1.3 STF 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STF	REET A Y-ST-2 LE ME REET A TY-ST-	ZIP ADDRESS			Cha		Addition	
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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 with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 - 825 - 4217 Daytime Phone #