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

Heinz Wosch

SIGNATURE:

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

V00199

WESTCOM CORPORATION

## **FILED** Mar 26 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address								
		•				1				
4712 Del Prado Blvd.						DO NOT WRITE IN THIS SPACE				
Suite 200 Cape Coral, FL 33904						3. Date Incorporated or Qualified				7
		<u> </u>	'			Dec. 13, 1991				_
	Place of Business	2a. Mailing Address				4. FEI Number		<del> -  -</del>	pplied For	4
21 1217 E. Cape Coral Pkwas						65-0303570		A	lot Applicable	4
Suite. Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		* -	Additional	
22   Suite 133   27						2 50 10 20 15 50 10			Required	4
L '						Election Campaign Financing     Trust Fund Contribution			) May Be I to Fees	
23 Cape Cora:l., FL 28 2:p Country Zip				Country		This corporation owes or has pa				4
24 33904 25 USA 29 30				<b>–</b>		Personal Property Tax due June		_ ′ -	itangibie □ No	
237	9. Name and Address of Current F		001	_		10. Name and Address of New Re-				1
,		- <del> </del>			ame					1
Ernest A. Seemann				Ernest A. Seemann  82 Street Address (P.O. Box Number is Not Acceptable)						-
4729 Del Prado Blvd.				82 Street Address (P.O. Box Number is Not Acceptable) Suite C						1
Cape Coral, FL 33904 83										1
{			ļ	84 C	105-	Cape Coral Parkwy	<del>- E</del> -	leg l 7in	Codo	4
				°   C	ape (		FL	_  85 3 <sup>Zjp</sup>	<del>1</del> 04	1
11. Pursuant	to the provisions of Sections 607.0502 a	ind 607.1508, Florida Statute	s the at	ove-na	med corpo	ration submits this statement for the pr	irpose c	f changing i	ts registered	1
office or i	registered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was a ons of. Section 607.0505, Flo	uthorized rida Stati	d by the utes.	corporation	n's board of directors. I hereby accept	the app	iointment as	registered	1
SIGNATURE		•								1
Signature typod or printed name of registered agent and title if applicable (NOTE: Regista					nature required	(when reinstating)	DATE			1 6
12.	OFFICERS AND D		13.			ADDITIONS/CHANGES TO OFFIC	ERS AN			1 8
TITLE	DVPT	DELETE	1.1 TH		Ţ			☐ Change	☐ Addition	Įξ
NAME	Wosch, Anne Marie			1.2 NAME						2
STREET ADDRESS	1121, B. cape coldi 1 km Dec. 1.		7							Įμ
CITY-ST-ZIP	Cape Coral, FL 33	3904. □ DELETE		TY-ST-ZIP	<u>`</u>			T Observ	Additor	ļè
TITLE	DP	T DETEIE	2.1 TITLE 2.2 NAME		j			☐ Change	☐ Addition	`
NAME	Wosch, Heinz		- 4							1
STREET ADDRESS	1217 Cape Coral F	kwy. E Ste 1	33	REET ADDA	1					1
CITY-ST-ZIP TITLE	Cape Coral, Fb 33	1904 DELETE	3.1 TiT	TY-ST-ZIF	<u> </u>			Change	☐ Addition	┨
mac .			1	32 NAME				and ordingo		1
SIMILAR LINES				REET ADDR	8F 9C					ĺ
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NAME			4. 2 NA	WE						
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NAME	•		5 2 NAME					<u>-</u>	28	
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NAME			6 2 NA	6 2 NAME		-03/26/9801	JU (	~UZ4		
STREET ADDRESS			6.3 SIF	6.3 STREET ADDRESS		***150.00				l
CITY - ST - ZIP				Y SF ZIP						
14. I hereby o	ertify that the information supplied with too this appual report or supplemental ar	this filing does not qualify for	the exer	mption t	stated in Se	ection 119.07(3)(i), Florida Statutes. I li	urther ce	ertify that the	information	
officer or	on this annual report or supplemental ar director of the corporation or the receive	r or trustee empowered to ex	kedute\th	nis reper	ri as require	ed by Chapter 607, Florida Statutes; a	nd that r	ny name apr	poars in	1
DIOCK 12 (	or Block 13 if changed, or on an attachm	ient with an address.	1 1						l	l l

3/12/98

Daytime Phone #