

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathis  
Secretary of State  
Division of Corporate Filings

APPROVED  
AND  
FILED

DOCUMENT # V31520

(2)

MAY 23 11:10:15

1. Corporation Name

WEST HOLLYWOOD LANES, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business

296 S STATE ROAD 7  
HOLLYWOOD FL 33023

3. Mailing Address

296 S STATE ROAD 7  
HOLLYWOOD FL 33023

(Do not write in this space)

3. Date Incorporated or Qualified  
04/27/1992

3a. Date of Last Report  
05/01/1994

4. FEI Number  
65-0327969

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.01,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 State Apt # etc

2a. Mailing Address

26 State Apt # etc

22 City & State

27 City & State

23 City & State

28 City & State

24 City

25 Country

29 City

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PIERSON, PAUL R  
296 S. STATE ROAD 7  
HOLLYWOOD FL 33023

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.09(1) and 607.15(8), 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 Sections 607.09(1), Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not registered agent, leave blank)

Signature of Registered Agent (if not registered agent, leave blank)

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, 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 person or persons empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1, or Block 1a, of this report, or on an addendum with an address.

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, 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 person or persons empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1, or Block 1a, of this report, or on an addendum with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-18-95  
(305) 961-8207

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