

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

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **272769** (1) *1998*

1. Corporation Name  
**WONDER-LAND INVESTMENT INC**

Principal Place of Business <b>% MS. JUANA CAMUS</b> <b>6331 SW 42ND ST.</b> <b>MIAMI FL 33155</b>	Mailing Address <b>% MS. JUANA CAMUS</b> <b>6331 SW 42ND ST.</b> <b>MIAMI FL 33155-5111</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report	4. FEI Number	Applied For
21	26	08/14/1963	04/25/1996	59-2939430	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.				
22	27				
City & State	City & State				
23	28				
Zip	Country				
24	25				
	29				
	30				

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**GARCIA, EDUARDO**  
**1149 S.W. 27TH AVE.**  
**SUITE 204**  
**MIAMI FL 33135-2258**

10. Name and Address of New Registered Agent

81 Name **OESTERLE & OESTERLE P.A.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**9506 SOUTH RED ROAD**

83

84 City **Miami** FL 85 Zip Code **33156**

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 *Douglas W. Oesterle* DATE **4/28/98**

Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PST</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAMUS, JUANA MS.</b>	1.2 NAME	
STREET ADDRESS	<b>6331 SW 42ND ST.</b>	1.3 STREET ADDRESS	<b>200002545302--6</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	<b>-06/03/98--01009--025</b>
TITLE	<b>V</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>****150.00 ****150.00</b>
NAME	<b>CAMUS, JUANA MS.</b>	2.2 NAME	
STREET ADDRESS	<b>6331 SW 42ND ST.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.