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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 492056

(7)

**WOLD CORPORATION** 

## FILED Mar 18 1997 8:00am Secretary of State



	ON FL 33432		ON FL 33432-7404	PEOI				
					Date Incorporated or Qualified     12/04/1975	3a. Date of Las 03/07/1996		
2. Principa	Place of Business	2a. Mailing	Address		4. FEI Number		Applied For	
21		26	26				Not Applicable	
Suite, Apt. #, etc.		Suite A			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & St 23	tate	City & S 28	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζφ <b>24</b>	Country 25	Zip 29	30	ountry	This corporation has liability for i     Florida Statutes	ntangible tax unde Yes \(\Boxed{\omega}\) No	r s. 199.032,	
		s of Current Registered Ag			10. Name and Address of New Re	gistered Agent		
OSBORNE, RAY C. 700 S. FEDERAL HWY BOCA RATON FL 33432				81 Name DO 82 Street Add 15	DONALD E. BAKER Address (P.O. Box Number is Not Acceptable) 1515 S. Federal Hwy. # 201			
				84 City Bo	oca Raton	FL 85 2	ip Code <b>3432</b>	
11. Pursua office d agent SIGNATURI	or registered agent, or both, I am familiar with, and acce	in the State of Florida Such pt the obligations of Section	change was authoriz 607.0505, Florida Si	ted by the corporal atutes.  Donald E.	poration submits this statement for the p tion's board of directors. I hereby accep Baker	t the appointment 2/19/97	as registered	
	Signation, type doc perted name of	of registered agent and title it applicable		red Agent signature requi	ired when reinstating)	DATE		
12.	I PD	FICERS AND DIRECTORS	13 DELETE 1.1	TITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT		
NAME	WOLD, KEITH C	,		NAME		E Chang	ie And Modition	
STREET ACIONES	ACAS A FEDERAL I	IWV 201		STREET ADDRESS			,	
CITY-ST ZIP	BOCA RATON, FL 0			CITY-ST-ZIP		. ૨૩૬	/32_	
TITLE	ST			TITLE		Chang	e Addition	
NAME	BAKER, DONALD E	·		NAME				
STREET ADDRES	ARAR A PERFORMAN	WY. 201	2.3	STREET ADDRESS			- *	
Cify-ST-ZiP	BOCA RATON, FL 0			A CITY-ST-ZIP	• •	3343		
Tille				TITLE		Chang	e 🔲 Addition	
NAME			3.2	NAME				
STREET ADDRESS	55		3.3	STREET ADDRESS				
C-TY ST ZIP				, CITY-ST-ZIP			<u> </u>	
TITLE		Ĺ		TITLE		Chang	e [_] Addition	
NAME				2 NAME				
STREE! ACCURES	15			STREET ADDRESS				
CITY-ST ZIP				CITY - ST - ZIP		☐ Chang	e Addition	
TITLE		ŧ	_	TITLE		L. Grang	1000000A () By	
NAME.	10		1	NAME CTOTET ADDRESS				
STREET ADORES	55			STREET ADDRESS				
CITY-ST-ZIF T-TLE				CITY-ST-ZIP		Chang	e Addition	
		L		NAME			NOUILION	
NAME DIOCCI ADDDES	ne l		L	i				
STREET ADDRES	00		I I	STREET ADDRESS				
CITY-ST-7P			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.

SIGNATURE:

IGNATURE AND TYPES OF THINTED NAME OF SIGNING OFFICEN OR SMECT OF

et C 1997

561-395-2600 Daysme Phone #