

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 27 AM 8:04

DOCUMENT # **P94000008373 (0)**

1. Corporation Name  
**WWL INVESTORS, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**7200 SOUTH WEST 83RD STREET PLAZA** **7200 SOUTH WEST 83RD STREET PLAZA**  
**STE. E-112** **STE. E-112**  
**MIAMI FL 33143** **MIAMI FL 33143**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>02/01/1994</b>	3a. Date of Last Report
4. FEI Number <b>13-2570358</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
6. This corporation has liability for intangible tax under S. 195.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	County 25
Zip 29	County 30

9. Name and Address of Current Registered Agent <b>KELLOGG, JUNE</b> <b>7200 SOUTH WEST 83RD STREET PLAZA</b> <b>STE. E-112</b> <b>MIAMI FL 33143</b>	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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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 \_\_\_\_\_ (Signature of Registered Agent or person authorized to register a corporation) \_\_\_\_\_ (Signature of Registered Agent or person authorized to register a corporation) \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Pres. Mitchell, Ellen	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1225 No. Ridge Road	12 NAME	
STREET ADDRESS	Shrub Oak, NY 10588	13 STREET ADDRESS	
CITY, ST, ZIP		14 CITY, ST, ZIP	
TITLE	V.Pres. Lazarow, Victor	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1410 Jefferson Tower	22 NAME	
STREET ADDRESS	Syracuse, NY 13202	23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY, ST, ZIP	
TITLE	Sec. Lazarow, William	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1350 Ave. of the Americas, #1802	32 NAME	
STREET ADDRESS	New York, NY 10019-4701	33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *William Lazarow* 3/30/95 (305) 665-5517  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR