FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V74307** **(2)**

1. Corporation Name
W W B L ENTERPRISES, INC.

Principal Place of Business	Mailing Address
%DELUXE CLEANERS 603 W. BAY DR. LARGO FL 34640	1001 STARKEY RD LOT 94 LARGO FL 34641-3177

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/27/1992
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business
21: Wanda LaLlas, Consultant
22 Suite, Apt. #, etc.: 1001 Starkey Rd #94
23 City & State: Largo Fl
24 Zip: 34641
25 Country: Pinellas

2a. Mailing Address
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

4. FEI Number: 59-3144635 ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LALLAS, WANDA B
1001 STARKEY ROAD
LOT 94
LARGO FL 34641

10. Name and Address of New Registered Agent

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 607.0502 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: Wanda B. LaLlas President Wanda B. LaLlas 4/24/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	BUCK, STUART	12 NAME		
STREET ADDRESS	1222 ROSEVALLEY RD	13 STREET ADDRESS		
CITY-ST-ZIP	REPUBLIC WA 99166	14 CITY-ST-ZIP		
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	BUCK TESCHNER, KAREN	22 NAME		
STREET ADDRESS	RR. 1 BOX 8	23 STREET ADDRESS		
CITY-ST-ZIP	NIANTIC IL 62551	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☒ Change ☐ Addition
NAME	LALLAS, JEFFERY	32 NAME	LALLAS, JEFFERY	
STREET ADDRESS	218 UTICA ST	33 STREET ADDRESS	12 ALESSANDRO DR.	
CITY-ST-ZIP	ITHICA NY 14850	34 CITY-ST-ZIP	Ithica N.Y. 14850	
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	LALLAS SULLIVAN, IRENE	42 NAME		
STREET ADDRESS	610 ARCHWOOD DR	43 STREET ADDRESS		
CITY-ST-ZIP	ANN ARBOR MI 48103	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	LALLAS DRIGGS, RAMONA	52 NAME		
STREET ADDRESS	79 MULBERRY ST	53 STREET ADDRESS		
CITY-ST-ZIP	GARDEN CITY L.I. NY 11501	54 CITY-ST-ZIP		
TITLE	P	61 TITLE		☐ Change ☐ Addition
NAME	LALLAS, WANDA B	62 NAME		
STREET ADDRESS	1001 STARKEY RD #94	63 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 34641	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 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 addition.

SIGNATURE: WANDA B. LALLAS Wanda B. LaLlas Apr. 24 1995 (813)5350119
SIGNATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR Date Daytime Phone #

0943166 CF