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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 135386

1. Corporation Name

C.R. WILKS INC

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90025 002 ***150.00

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Principal Place of Business Mailing Address) (8618) (1898 (1181 81189 (1181 18119 811) etan etan etan etan etan etan etan
2600 S W 27TH AVE - 2600 S W 27TH AVE							
MIAMI FL 33133 MIAMI FL 33133							DO NOT WRITE IN THIS SPACE
)-	3. Date Incorporated or Qualifed
	•					İ	12/02/1937
2. Principal Pl	lace of Business	2a. Mailing Address					4. FEI Number Applied For
21 26						1	-26 7074227 65- 084 657 0 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5 Contifered of Status Desired Status Desired	
22 27						Fee Required	
City & State City & State					1	6. Election Campaign Financing \$5.00 May Be	
23 28						Trust Fund Contribution Added to Fees	
Zip				ıntry		- 1	8. This corporation owes the current year Intangible Personal Property Tax.
24	25	29 29	30	1			Personal Property Tax.
9. Name and Address of Current Registered Agent 81 Name							tulic and Macross of Non-Registron Agent
TAYLOR, MARLENE T.							
2600 S W 27TH AVE				82	Street	Address	(P.O. Box Number is Not Acceptable)
. MIAN	M FL 33133			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							
SIGNATORE	Signature, typed or printed name of registered ag	gent and title if applicable. (NO	TE: Registered	Ager	nt signature (required who	en reinstating) DATE
12.		AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD.	☐ DELETE	1.1 Π				☐ Change ☐ Addition ☐
NAME	TATHAM, BERNICE		1.2 N				
STREET ADDRESS	2600 SW 27 AVE				TADDRESS	•	
CITY-ST-ZIP	MIAMI FL 33133	DELETE			T-ZIP	 	☐ Change ☐ Addition
TITLE !	VPDS			2.1 TITLE 2.2 NAME		}	
NAME	TAYLOR, MARLENE T				T ADDRESS		·
STREET ADDRESS	2600 SW 27 AVE				ST-ZIP	1	
CITY-ST-ZIP TITLE	MIAMI FL 33133	DELETE	3.1 T)1-ZIP	 	Change ☐ Addition
NAME I			3.2 N				_,
STREET ADDRESS					TADDRESS	;	
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STREET ADDRESS			4.3 \$	TREE	T ADDRESS	;	
CITY-ST-ZIP			44C	ITΥ-S	T- ZIP		
TITLE	· -	☐ DELETE	5.1 T				☐ Change ☐ Addition
NAME			5.2 N				
STREET ADDRESS					TADDRESS	5	
CITY-ST-ZIP					ST-ZIP		
TITLE		☐ DELETE	6.1 T				☐ Change ☐ Addition
NAME			6.2 N		T 100000	. ,	
STREET ADDRESS					TADDRESS	ï	
CITY-ST-ZIP			6.4 C	ITY-S	IT-ZIP		

14. I 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 chapter 607 on an attachment with an address, with all other like empowered.

SIGNATURE: