

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

FILED

Feb 14 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 340959

(6)

1. Corporation Name

WRONO ENTERPRISE CORP.



Principal Place of Business

211 NW 5TH AVENUE
HALLANDALE FL 33009

Mailing Address

211 NW 5TH AVENUE
HALLANDALE FL 33009-40193. Date Incorporated or Qualified
01/31/19693a. Date of Last Report
05/01/1996

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1261458

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLOYD PEARSON RICHMAN GREER WEIL ET AL.
MIAMI CENTER, 10TH FL
201 S. BISCAYNE BLVD
MIAMI FL 33131

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

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 PDCE ☐ DELETENAME WRONO, SHARON
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330091.1 TITLE ☐ Change ☐ AdditionNAME WRONO, SHARON
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330091.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE VAF ☐ DELETENAME DEGRASSE, JAMES
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330092.1 TITLE ☐ Change ☐ AdditionNAME DEGRASSE, JAMES
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330092.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE ST ☐ DELETENAME WRONO, HELEN
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330093.1 TITLE ☐ Change ☐ AdditionNAME WRONO, HELEN
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330093.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE V ☐ DELETENAME VERDON, LARRY
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330094.1 TITLE ☐ Change ☐ AdditionNAME VERDON, LARRY
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330094.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☒ DELETENAME MCPHEE, BRUCE
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330095.1 TITLE ☐ Change ☐ AdditionNAME MCPHEE, BRUCE
STREET ADDRESS 211 NW 5TH AVENUE
CITY-ST-ZIP HALLANDALE FL 330095.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SHARON WRONO

2-10-97

Date

305
456-6979

Daytime Phone #

CR2E034 (9/96)