

1-17-97 B-0216-C

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

FILED

Jan 17 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 345989 (8)

1. Corporation Name
WAKE CORP.

Principal Place of Business

12361 NW 30TH ST
SUNRISE FL 33323
US

Mailing Address

12361 NW 30TH ST
SUNRISE FL 33323-1517
US3. Date Incorporated or Qualified
05/12/19693a. Date of Last Report
01/29/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-1264575

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

WAKSNIS, DONALD
12361 NW 30TH ST
SUNRISE FL 33323

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

Signature typed or printed name of registered agent and then if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE PD
2. NAME WAKSNIS, DONALD
3. STREET ADDRESS 12361 NW 30TH ST
4. CITY- ST- ZIP SUNRISE FL☐ DELETE1. NAME WAKSNIS, MICHAEL
2. STREET ADDRESS 16091 PLATT BLVD
3. CITY- ST- ZIP FT LAUDERDALE FL☐ DELETE1. TITLE D
2. NAME WAKSNIS, ELEANOR
3. STREET ADDRESS 16091 PLATT BLVD
4. CITY- ST- ZIP FT LAUDERDALE FL☐ DELETE1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP☐ DELETE1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP☐ DELETE1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 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, I changed or on an attachment with an address.

SIGNATURE:

DONALD M. WAKSNIS

Date

Daytime Phone

CR2E034 (9/96)