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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 354910

(2)

W.W. WILLIAMS CO.

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

23

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

Principal Place of Business Mailing Address

1057 N. E. 43RD ST 1057 N. E. 43RD ST
FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334

26

27

28

FILED Jan 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date incorporated or Qualified

11/05/1969

59-1297352

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

Zip	Country	Zip	Co	untry		8. This corporation owes or has paid the current year Intangio	ie	
24	25	29	30		Personal Property Tax due June 30. Yes No			
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
WILLIAMS,KENT					Name			
1057 N.E. 43RD ST.				82	82 Street Address (P.O. Box Number is Not Acceptable)			
FT LAUDERDALE FL 33334					011000710	adicas (1.5. son rectisor to trot, tasapiasis)		
				83				
				84	Ch.	loe 7% Ondo		
				04	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 refinstating) DATE								
12.	Signature, typed or printed name of registered agent and title if applicable, (NOTE: Register OFFICERS AND DIRECTORS 13.			d Age	nt signature rec	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN:		
TITLE	PD OFFICERS AND	DIRECTORS	1.1 T	TIE	- 1		Addition	
NAME	WILLIAMS, KENT		12 N					
STREET ADDRESS	0440 M M 00 OT				ADDRESS			
CITY-ST-ZIP	ET LAUDEDDALE EL 00000			!TY - S'	1		-	
TITLE	VD	DELETE	2.1 7		1-21	Change	Addition	
NAME	WILLIAMS, SHIRLEY R			AME	-			
STREET ADDRESS	3146 N W 69 ST				ADDRESS		Í	
CITY-ST-ZIP	TT I ALIDEDDALE EL 00000			OTY-S				
TITLE	STD	☐ DELETE	3.1 T	_	<u></u>	Change i	Addition	
NAME	CLEVELAND, DONALD L.		3.2 N	AME				
STREET ADDRESS	4007 BL OMBUTON AND			TREET	ADDRESS		-	
CITY-ST-ZIP	DELRAY BEACH FL		3.4.0	ity-s	T-ZIP			
TITLE		DELETE	4.1 T.			☐ Change ☐ A	Addition	
NAME	4.2			IAME			j	
STREET ADDRESS	4.3		4.3 S	TREET	ADDRESS		1	
CITY-ST-ZIP	4.41			ITY-SI	r-ZIP			
TITLE		DELETE	5.1 T	TLE		☐ Change ☐ A	Addition	
NAME			5.2 N	AME	1			
STREET ADDRESS			5.3 S	TREET.	ADDRESS		}	
CITY - ST - ZIP			5.4 C	TY-S1	r-ZIP			
TITLE		☐ DELETE	6.1 T	TLE		☐ Change ☐ A	Addition	
NAME			6.2 N	AME			1	
STREET ADDRESS			6.3 S	REET.	ADDRESS		Ì	
CITY - ST - ZIP				TY-S1				
14. Thereby 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 suppliemental 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.								