

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 668739 (6)

1. Corporation Name

WILBER, INC., OF BOCA.



Principal Place of Business

C/O E. SCOTT GOLDEN, ESQ.
644 SOUTHEAST 4TH AVENUE
FT. LAUDERDALE FL 33301

Mailing Address

C/O E. SCOTT GOLDEN, ESQ.
644 SOUTHEAST 4TH AVENUE
FT. LAUDERDALE FL 33301

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

9. Name and Address of Current Registered Agent

GOLDEN, E. SCOTT, ESQ.
644 S.E. 4TH AVENUE
FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified

05/02/1980

3a. Date of Last Report

02/14/1995

4. FET Number

59-1997506

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes.

☐ Yes

☒ No

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 title if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP

PST
WILBER, CARL
9112-D S.W. 20TH STREET
FT. LAUDERDALE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

D
WILBER, CARL
9112-D S.W. 20TH STREET
FT. LAUDERDALE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

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TITLE NAME STREET ADDRESS CITY- ST- ZIP

☐ DELETE

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)(k), 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:

Carl Wilber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-96

305-474-7844

Daytime Phone #

Daytime Phone #

CR2E034 (12/95)