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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

96/6)

CR2E034

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 668739

(6)

WILBER, INC., OF BOCA.

NAME

STREET ADDRESS

appears in Block 12 or Block

CITY - ST - ZIP

Mailing Address Principal Place of Business C/O E. SCOTT GOLDEN. ESO. C/O E. SCOTT GOLDEN. ESO. 644 SOUTHEAST 4TH AVENUE 644 SOUTHEAST 4TH AVENUE FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 83301-3102 3a. Date of Last Report 3. Date Incorporated or Qualified 05/02/1980 04/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1997506 281 Town Center Mall 26 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Boca Katon Added to Fees Trust Fund Contribution 28 Country Zip This corporation has liability for intangible tax under s. 199.032, 25 US (1 29 9) Name and Address of Current Registered Agent 🌠 Yes 🗌 No 30 Florida Statutes 10. Name and Address of New Registered Agent 81 Name GOLDEN, E. SCOTT, ESQ. 644 S.E. 4TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 63 64 City 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, typical or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change PST 1.1 TITLE TITLE WILBER, CARL 1.2 NAME NAME 9112-D S.W. 20TH STREET 1,3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY - \$1 - ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE DILLE WILBER, CARL 2.2 NAME NAME 9112-D S.W. 20TH STREET 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2.4 City-ST-ZIP CITY - ST - ZIP Addition DELETE Change 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-St-ZiP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 61 TITLE TOLE

62 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