Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

□No

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F11599

1. Corporation Name

W-P CENERAL CORPORATION

Mailing Address				
P.O. BOX 5403 FT. LAUDERDALE FL 33310-5403				
2a. Mailing Address				
26				
Suite, Apt. #, etc.				
27 City 8 State				
City & State				

9. Name and Address of Current Registered Agent

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90233 043 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

12/29/1980 4. FEI Number

59-2047875

1750 E. SUNRISE BLVE THIRD FLOOR				2 Street Address (P.O. Box Number is Not Acceptable)				
	AUDERDALE FL 33310							
				City		FL	85 Zip C	
office or re	to the provisions of Sections 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Such m familiar with, and accept the obligations of, Section	r change was autho	orized by t	the corporation	pration submits this statemen n's board of directors. I herel	t for the purpose of one of the control of the cont	changing its itment as reg	registered jistered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	e. (NOTE: Reg	rstered Agen	t signature required	when reinstating)	DATE		— Ì
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME	LEVAN, ALAN B		1.2 NAME					
STREET ADDRESS	1750 E. SUNRISE BLVD. THIRD FLOOR		1.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST	-ZIP				
TITLE	VTS	DELETE	2.1 TITLE				Change	Addition :
NAME	GILBERT, GLEN R.		2.2 NAME					
STREET ADDRESS	1750 E. SUNRISE BLVD. THIRD FLOOR		2.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL	i	2.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4, CITY-S	T-ZIP				
TITLE		DELETE	4.1 TITLE				Change	☐ Addition
NAME			4.2 NAME	1				
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S1	r- ZIP				
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	r-ZIP				
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME		:	6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST	- 1			 	
14. I hereby of	certify that the information supplied with this filing doe on this annual report or supplemental annual report is	es not qualify for the	e exempti	on stated in S my signature	ection 119.07(3)(i), Florida S shall have the same legal et	itatutes. I further cert fect as if made unde	ify that the iner oath; that	nformation 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 with all other like empowered.