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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**FILED** Apr 04 1997 8:00am Secretary of State

1997 DIVISION OF CORPORATIONS  DOCUMENT # F27717 1. Corporation Name WIREMEN AND COMPANY, INC.												
362 PINES	labe of Business BLVD. SUITE 126 PINES FL 33024	8362 F	Mailing Address  8362 PINES BLVD. SUITE 126 PEMBROKE PINES FL 33024-6600				t 100H00 III	in man ilian ilian ilian ilili (		P(#)1 41411 B/8tt	51 <b>6</b> 71 1 <b>34</b> 1	
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Suito A	pt.#, etc.		26	lite, Apt. #, etc.			··	59-244	U283			ot Applicable
2 Stiller, 75	pri. m. egc.		27	into, Apr. #, etc.				<ol><li>Certificate</li></ol>	of Status Desired			Additional equired
City & S	itate			ty & State			·		ampaign Financing		\$5.00	May Be to Fees
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4]	25		29	···	30			Florida Sta	atutes	Yes	□ No	
		d Address of Curre	nt Register	ed Agent		81	Name	10, Name and	d Address of New f	Registered	Agent	
83	TRINGO, DAVID 8362 PINES BLVD. SUITE 126 PEMBROKE PINES FL 33024							ldress (P.O. Box Nu	dress (P.O. Box Number is Not Acceptable)			
						83						
						84		·····			85 Zip	Code
11. Pursua	int to the provision	s of Sections 607.050	02 and 607.	1508, Florida Statu	ites, the	1 1	- *	orporation submits t	his statement for the	FL purpose o	of changing i	ts registered
SIGNATUF	₹E	s of Sections 607.05t, or both, in the State and accept the oblig	gent and title if ap	oplicacile (NC	OFE Registe	above ed by tatutes	e-named co the corporation	quired when reinstating)		purpose coept the ap		
11. Pursua office o agent. SIGNATUR 12.	₹E		gent and title if ap	oplicacile (NC	OFE Registe	above ed by tatutes	e-named co the corporation	quired when reinstating)	his statement for the ectors. I hereby acc	purpose coept the ap		
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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

SIGNATURE: