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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F74783

(4)

W, K & S SALES CORPORATION, INC.

FILED Jan 30 1997 8:00am Secretary of State

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121 STAR D	ace of Business RIVE I BEACH FL 32548	Mailing Address 121 STAR DRIVE P. O. BOX 1685 FT.WALTON BEACH FL 32549-1885 US			3. Date Incorporated or Qualified 04/02/1982 03/20/1996				
2. Princ-pal	Place of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26 121 Star D	rive		**************	59-2211273		No	t Applicable
Suite, Ar	ot #, etc.	Suite, Apt #, etc				Certificate of Status Desired		.75 A ee Re	dditional quired
City & St	ate	City & State 28 Ft Walton	Beach,	1	?L	Election Campaign Financing Trust Fund Contribution		5.00 dded t	May Be o Fees
Ziρ	Country	Zιp	Coun	try	····	8. This corporation has liability for in	ntangible tax ur	nder s.	199.032,
24	25	29 32548	30 U	SA			Yes No		
	9, Name and Address of Current	Registered Agent				10. Name and Address of New Reg	istered Agent		
	ILLIAMS, RICHARD E		8	11 1	Vame •				
	21 STAR DRIVE		18	2 5	Street Addres	ss (P.O. Box Number is Not Acceptab	e)		
FT	WALTON BEACH FL 32548		8	3			·	·-···	***************************************
			[8	14 (City		FI 85	Zip C	lode
agent I SIGNATURE	Signature typed or per led name of registerest agen	tions of Section 607.0505, FI	orida Statu C: Registered /	tes.		d when re-instating)	DATE		
12.	OFFICERS AND		13.		·	ADDITIONS/CHANGES TO OFFIC			
T:TLE	SD NOTH C	DELETE TO	1.1 1810					nange	Addition
NAME	WILLIAMS, DOROTHY S 121 STAR DRIVE		1.2 NAV						
STREET ADORES	FT WALTON BCH, FL 00000		1.3 STR						
City-St-7'F	D	DELETE	1.4 CiTY		NP				I I I della
NAME	WILLIAMS, DOROTHY S	L. J. Ditterit	21 TITL					hange	Addition
SIRSET ADDRESS	404 OTAB DONE		2 2 NAM		opeco.				
City-ST-ZIP	FT WALTON BCH, FL 00000		2.3 STRE 2. 4 CIT						
Tifle	DP	DELETE	31 TITL		Zar .		Пс	hange	Addition
NAME	WILLIAMS, RICHARD E	•—	3.2 NAN					•	
STREET ADDRESS	ANA OTAD DOME		3 3 STR	EET AD	DRESS				
CITY-ST-7P	FT WALTON BCH, FL 00000		3 4. CIT	r-ST-:	ZIP				
1 LE		DELETE	4.1 TITU				□ c	hange	Addition
NAME			4. 2 NAN	Æ					
STREET ADORES	s		4.3 STR	ET AD	DRESS				
CHY-ST-74P			4.4 CiTY	- \$1 - 7	ZIP				
1 11.6		☐ DELETE	5 1 TITL	E			c	nange	Addition
NAME			5 2 NAM	Ę					
STREET ADORES	S		5.3 STR	ET AD	DRESS				
CHY-ST-ZP			5 4 CHTY	-\$1-2	P P		· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	61 TITL	E			□ c	range	Addition
NAME			6 2 NAM	lŧ					
STREET ADORES:	8		63 STR	ET AD	Dress				

SIGNATURE:

information indicated on the Lami an officer or director.

NATURE AND LYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR 1-27-97 904

and accurate and that my signature shall have the same legal effect as if made under oath; that to execute this report as required by Chapter 607, Florida Statutes; and that my name

CITY-ST-ZIP

64 CITY-ST-ZIP

14. If do hereby certify that the intermation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the

annual report or supplemental annual report is true the corporation or the receiver or true e empower