

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 05, 1999 8:00 am
Secretary of State

08-05-1999 90012 039 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F93000004569

1. Corporation Name
WI HOLDINGS, INC.



Principal Place of Business: 7900 ISLAND BLVD. NORTH MIAMI BEACH FL 33160
 Mailing Address: 7900 ISLAND BLVD. NORTH MIAMI BEACH FL 33160

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		10/11/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0441919	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	
24	25	29	30	<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes the current year Intangible Personal Property.	
ARKIN, RICHARD A, ESQ 7900 ISLAND BLVD. NORTH MIAMI BEACH FL 33160				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ARKIN, RICHARD A, ESQ 7900 ISLAND BLVD. NORTH MIAMI BEACH FL 33160				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City		85 Zip Code	
North Miami Beach				FL 33160			

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: ROBERT FINVARB VICE PRESIDENT DATE: 7/23/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUMP, JULIUS	1.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUMP, EDDIE	2.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	2.4 CITY-ST-ZIP	
TITLE	EVPD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATUS, ALAN	3.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE	EVPS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIEB, JAMES	4.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	4.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TORPEY, CARITE L	5.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	5.4 CITY-ST-ZIP	
TITLE	VAST <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOLLRATH, ROBERT	6.2 NAME	
STREET ADDRESS	7900 ISLAND BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	6.4 CITY-ST-ZIP	

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)

FedEx USA Airbill

FedEx Tracking Number

803742991988

1 From (please print and press hard)

Date 4/29/99 Sender's FedEx Account Number 1517-4528-8

Sender's Name Robert J. Finvarb Phone 305 937-7823

Company WILLIAMS ISLAND ASSOCIATES LTD

Address 7900 ISLAND BLVD

City MIAMI State FL ZIP 33160

2 Your Internal Billing Reference Information (Optional) (Print at 24 characters will appear on invoice) State filing

3 To (please print and press hard) Division of Corporations Phone 1

Recipient's Name Florida Dept. of State

Company 409 EAST GAINES STREET

Address Tallahassee, FL 32399

City Tallahassee, State FL ZIP 32399

For Hold at FedEx Location check here (We cannot deliver to P.O. Boxes or P.O. ZIP Codes)

Hold Weekday (Not available at all locations) For Saturday Delivery check here (Available for FedEx Priority Overnight and FedEx 2Day only)

Hold First Overnight (Not available at all locations)

Service Conditions, Declared Value, and Limit of Liability - By using this Airbill, you agree to the service conditions in our current Service Guide or U.S. Service Guide. Both are available on request. SEE BACK OF SERVICE GUIDE FOR INFORMATION AND ADDITIONAL TERMS. We are responsible for any claim in excess of \$100 per package whether the result of loss, damage, or delay, non-delivery, misdelivery, or reconnection, unless you declare a higher value, pay an additional charge, and document your actual loss in a timely manner. Your right to recover from us for any loss includes intrinsic value of the package, loss of sales, interest, profit, attorney's fees, costs, and other items of damage, whether direct, incidental, consequential, or special, and is limited to the maximum declared value for any FedEx Letter and FedEx Pak is \$500. Federal Express may, upon your request, and with some limitations, refund all transportation charges paid. See the FedEx Service Guide for further details.

Questions? Call 1-800-Go-FedEx (800)463-3339

The World On Time

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Form ID No 0230

4a Express Package Service Packages under 150 lbs. Delivery commitment may be later in some areas. (Next business morning)

FedEx Priority Overnight (Next business morning)

FedEx Standard Overnight (Next business afternoon)

FedEx First Overnight (Earliest next business morning delivery to select locations) (Next business afternoon)

FedEx 2Day (Second business day)

FedEx Express Saver (Third business day)

FedEx Letter Rate not available. Minimum charge One pound rate.

4b Express Freight Service Packages over 150 lbs. Delivery commitment may be later in some areas. (Call for delivery schedule. See back for detailed descriptions of freight services.)

FedEx Overnight Freight (Next business day)

FedEx 2Day Freight (Second business day)

FedEx Express Saver Freight (Up to 3 business days)

5 Packaging FedEx Envelope FedEx Pak FedEx Box FedEx Tube Other Pkg. (Other box must be checked)

6 Special Handling Does this shipment contain dangerous goods? No Yes (See Shipper's Declaration) (Shipper's Declaration not required)

Dry Ice UN 1845 CA Cargo Aircraft Only (Dangerous Goods cannot be shipped in FedEx packages)

7 Payment Shipper Recipient Third Party Credit Card Cash Check (Account No. for bill)

8 Release Signature (Signature required for all shipments)

Account No. Exp. Date

Card No. Total Packages 1 Total Declared Value \$ 00

Total Charges \$ 00

CONDITIONS, DECLARED VALUE, AND LIMIT OF LIABILITY apply to this shipment. See SERVICE GUIDE for details.

320

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The Florida Riviera

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July 28, 1999

Secretary of State
Division of Corporations
409 East Gains Street
Tallahassee, Florida 32399


Re: WI Holdings, Inc.

Dear Sir/Madam:

In accordance with your instructions, I am enclosing an Annual Report, received recently for the above referenced corporation, together with our check in the sum of \$150.00. On April 29, 1999, an Annual Report for such corporation was forwarded to your offices along with several other reports, which have been filed, via Federal Express. A copy of the air bill is attached. Federal Express delivered the package on Friday, April 30, 1999 at 9:58 a.m. and K. Walker at the Division of Corporations signed for the package.

Should you have any questions or comments, please call me.

Very truly yours,


Wanda Rodriguez
Legal Assistant to Robert I. Finvarb
Vice President & General Counsel

RIF:wgr
Enclosure