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FILED

May 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000944 (8)

1. Corporation Name  
WOC INC.

Principal Place of Business  
24460 AURORA RD.  
BEDFORD HEIGHTS OH 44146

Mailing Address  
24460 AURORA RD.  
BEDFORD HEIGHTS OH 44146



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
02/24/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

34-1765747

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 Zip

28 Zip

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24 Country

25 Country

29 Country

30 Country

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVC ☐ DELETE  
NAME WAXMAN, ARMOND  
STREET ADDRESS 24460 AURORA RD.  
CITY-ST-ZIP BEDFORD HEIGHTS OH

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE DC ☐ DELETE  
NAME WAXMAN, MELVIN  
STREET ADDRESS 24460 AURORA RD.  
CITY-ST-ZIP BEDFORD HEIGHTS OH 44146

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ST ☐ DELETE  
NAME WESTER, MARK  
STREET ADDRESS 24460 AURORA ROAD  
CITY-ST-ZIP BEDFORD HEIGHTS OH

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE V ☒ DELETE  
NAME STARR, ROBERT D  
STREET ADDRESS 24460 AURORA RD.  
CITY-ST-ZIP BEDFORD HEIGHTS OH 44146

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME GENE MERBER  
STREET ADDRESS 24460 AURORA RD  
CITY-ST-ZIP BEDFORD HEIGHTS OH

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME Vice - President  
6.3 STREET ADDRESS Flory Schmidhauer  
6.4 CITY-ST-ZIP 24460 Aurora Road  
Bedford Heights OH 44146

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 Mark Wester MARK WESTER 4/20/198 440-429-1831

CR2E034 (10/97)