

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

FILED
Mar 12, 1999 8:00 am
Secretary of State

03-12-1999 90037 025 ***300.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # F94000006290

1. Corporation Name
 WEN-STAR, INC.



Principal Place of Business: 809-B S. BROAD ST. THOMASVILLE GA 31792
 Mailing Address: 809-B S. BROAD ST. THOMASVILLE GA 31792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/09/1994

4. FEI Number: 58-2068107 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25

2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent: BIRD, T. BUCKINGHAM, 220 S. CHERRY ST., MONTICELLO FL 32344

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: FL

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: _____ DATE: _____
 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: PD	ROBERTS, WAYNE	1.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 809-B S. BROAD ST.	THOMASVILLE GA 31799	1.2 NAME:	
CITY-ST-ZIP:		1.3 STREET ADDRESS:	
		1.4 CITY-ST-ZIP:	31792
TITLE: STD	COHEN, RONALD A	2.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 809-B S. BROAD ST.	THOMASVILLE GA 31799	2.2 NAME:	DIRECTOR
CITY-ST-ZIP:		2.3 STREET ADDRESS:	
		2.4 CITY-ST-ZIP:	31792
TITLE: D	BLACKBURN, WILLIAM H	3.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 809-B S. BROAD ST.	THOMASVILLE GA 31799	3.2 NAME:	TREASURER/DIRECTOR
CITY-ST-ZIP:		3.3 STREET ADDRESS:	
		3.4 CITY-ST-ZIP:	31792
TITLE:		4.1 TITLE:	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME:		4.2 NAME:	SECRETARY
STREET ADDRESS:		4.3 STREET ADDRESS:	ROBERTS, MELODY B
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	809B S. BROAD STREET THOMASVILLE, GA 31792
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		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, with all other like empowered.

SIGNATURE: Melody B. Roberts 1/22/99 (912) 226-9050
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)