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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500005967 (3)

WAM ORLANDO, INC.

ţ.

Mailing Address Principal Place of Business 10201 JASPER AVENUE. STE 701 10201 JASPER AVENUE, STE 701 **EDMONTON** EDMONTON ALBERTA CANADA TSJ 3N7 DO NOT WRITE IN THIS SPACE ALBERTA CANADA TSJ 3N7 3. Date Incorporated or Qualified 12/07/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 98-0142666 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE Change Addition TITLE 1.1 TITLE

SCOTT, W G NAME 1.2 NAME 10201 JASPER AVENUE, STE 701 STREET ADDRESS 1.3 STREET ADDRESS **EDMONTON ALBERTA CANADA** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE VTAT Channe Addition TITLE 2.1 TITLE **EDGAR, PETER** NAME 2.2 NAME 10201 JASPER AVENUE, STE 701 STREET ADDRESS 2.3 STREET ADDRESS **EDMONTON ALBERTA CANADA** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE LYONS, RICKY NAME 3.2 NAME 10303 JASPER AVENUE STREET ADDRESS 3.3 STREET ADDRESS EDMONTON ALBERTA CANADA CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ■ Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Channe TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. Thereby 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 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Baun CFC

EP. BAYRUCK

03/04/98 403-423-5525

**FILED** 

Apr 14 1998 8:00am

Secretary of State