

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F96000000010 (6)

1. Corporation Name
WHITSYMS LIMITED INCORPORATED

Principal Place of Business

4057 N. W. 19 ST.
LAUDERHILL FL 33313

Mailing Address

4057 N. W. 19 ST.
LAUDERHILL FL 33313

2. Principal Place of Business

21 5 Southern Cross Lane

Suite, Apt. #, etc.

22 Apt. 207

City & State

23 Boynton Beach FL

Zip

24 33436

Country

25 USA

2a. Mailing Address

26 5 Southern Cross Lane

Suite, Apt. #, etc.

27 Apt. 207

City & State

28 Boynton Beach FL

Zip

29 33436

Country

30 USA

9. Name and Address of Current Registered Agent

ANDERSON, DONOVAN

4057 N. W. 19 ST.

LAUDERHILL FL 33313

5 Southern Cross Lane

Apt. 207

Boynton Beach

FL 33436

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

01/02/1996

4. FEI Number

65-0629453

Applied For

NOT APPLICABLE

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 or has paid the current year intangible
Personal Property Tax due June 30.

☐

Yes

☒

No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

300002263693-7

-08/11/97-01144-006

****165.00 ****165.00

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

TITLE PC ☐ DELETE

NAME ANDERSON, DONOVAN B
STREET ADDRESS 4057 N. W. 19 ST.
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE WVC ☒ DELETE

NAME MCDANIEL, WILLIAM
STREET ADDRESS 4057 N. W. 19 ST.
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE TD ☐ DELETE

NAME STOKES, BEVERLY
STREET ADDRESS 4057 N. W. 19 ST.
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE SD ☐ DELETE

NAME ANDERSON, SHARON
STREET ADDRESS 1901 N.W. 184 ST.
CITY-ST-ZIP MIAMI FL 33056

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

FILED

97 AUG -5 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (4/97)

2

WHITSYMS LIMITED
5 Southern Cross Lane
Apt 207
Boynton Beach, Florida 33436

July 31, 1997

Division of Corporation,
P.O. Box 6327
Tallahassee, Fl 32314

Subject: Annual Report

This serves to inform you that my annual report is late due to the fact that I did not receive my first report package which I was told was mailed to me in January 1997. The second notice I received during the month of July. I immediately called your office and was instructed by your Customer Service Representative that I should submit ~~\$~~ 165 along with this letter.

Also, please note the change of my address from:

4057 NW 19th Street,
Lauderhill, Florida 33313

to my new address:

5 Southern Cross Lane,
Apt. 207
Boynton Beach, Florida 33436



DONOVAN ANDERSON
PRESIDENT