FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani Secretary of State

1. Corporatio		(-)						
WOO	dside enterprises, inc			1 LDO((() 0301) (012 de)((01010 ()	II IFAI AIAN AN	0(A 01841 010)	i Biêli Biêli Ida	
Principal Place	e of Rusinoss	Mailing Address	A					
	5TH AVENUE	5675 SW 35TH AVENU	F					
	DD FL 33321	HOLLYWOOD FL 33312						
US		U\$		3. Date Incorporated or Qualified 12/13/1982		of Last R 4/26/19		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	1		Applied For	
21		26		59-2242862		h	Not Applicable	9
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional Required	
Orty & Stat	e	City & State		6. Election Campaign Financing			0 May Be	
Ζ φ	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for	mtangible ta		d to Fees 199.032.	\dashv
24	25	29	30	Florida Statutes Yes	□No		1001002	
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New F	Registered	Agent		
DECKE	ELBAUM, GORDON							
	SW 35TH AVENUE		82 Street Ac	ddress (P.O. Box Number is Not Acceptat	ole)			
	201 SOUTH		83				<u> </u>	
HOLLY	WOOD FL 33312		84 City			85 Z ₁	p Code	\dashv
11 Pursuant	to the provisions of Sections 607 050	22 and 607 1609 Florida Statuta	o the object possed con-		FL			_
or registe familiar w	red agent, or both, in the State of Flo ith, and accept the obligations of, Se	rida. Such change was authorize ction 607 0505. Florida Statutes	d by the corporation's bo	noration submits this statement for the pur pard of directors. I hereby accept the app	ointment as	reg-stered	agent. Lam	.6
SIGNATURE	and thoops the congestions of, con	enor corrector, the det category.						
	Signature, typed or printed name of registered ag-		F: Registered Agent signature ne p		DATE		·· ·	
12.	P OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12	700000110000000000000000000000000000000
N/Mi	DECKELBAUM, GORDON		1.2 NAME		L	onalige		.
STREET ADDRESS	5675 SW 35TH AVENUE		13 STREET ADDRESS					18
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY - ST - 7IP					
TIÈLE	ST NOODIG	DELETE	2 1 11'LE		[Change	Addit on	(
NAME STREET ADDRESS	DECKELBAUM, MORRIS 5675 SW 35TH AVENUE		2.2 NAME					
CHY-ST-ZIP	HOLLYWOOD FL		2.3 STREET ADDRESS 2.4 CITY - ST - ZIP					
Title	V V	DELETE	3 1 TITLE		- ·	7 Change	Addition	\dashv
NAME	MOROZ, BORIS		3.2 NAME			_ `		
STREET ADDRESS	5675 SW 35 AVENUE		3.3 STREET ADDRESS					
CIZY-ST-ZIP	HOLLYWOOD FL		34 CIFY+ST ZIF					
11°_E		☐ DELETE	4 1 TITLE			Change	Addition	
NAME CILLERY ATMODECE			4.2 NAME					
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CHTY - ST - ZIP					
16.F		☐ DELETE	5 1 TITLE	Video	г] Change	Addition	\dashv
NAME		—	5.2 NAME		_		_	
STREET ADDRESS			5 3 STREET ADDRESS					
C 1Y-S1-Z-P			5.4 CITY - \$1 - ZIP					
TITLE		☐ DELETE	6 1 TITL€			Change	☐ Addition	
NAME CERTE ENDOUGE			6.2 NAME					-
SIMEET ADDRESS			6.3 STREET ADDRESS					

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 0/(3)(k), 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 logal effect as if made under cath, 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 attactment with an address.

SIGNATURE:

3/6/96 (954)983-6310