

5-21-97 B- 7620 -c
 FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
 May 21 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT '1997



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

DOCUMENT # **G33794** (0)
 1. Corporation Name
WPM, INC.



Principal Place of Business
**5638 SW 25TH STREET
 HOLLYWOOD FL 33023**

Mailing Address
**5638 SW 25TH STREET
 HOLLYWOOD FL 33023-4009**

3. Date Incorporated or Qualified
04/19/1983

3a. Date of Last Report
04/01/1996

4. FEI Number
59-2288268

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25

26 Mailing Address

27 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30

9. Name and Address of Current Registered Agent

**SIMONS, JEROME A.
 4601 SHERIDAN ST. STE 500
 HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name
Michelle Langel

82 Street Address (P.O. Box Number is Not Acceptable)
3610 Ottawa Lane

83 **Cooper City**

84 City

85 Zip Code
FL 33024

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 *Michelle Langel* DATE **5/12/97**

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1. PD
**LANGEL, EDWIN
 5638 SW 25TH ST.
 HOLLYWOOD FL**

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.

SIGNATURE: *[Signature]* DATE: **5/12/97**

TITLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)