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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

**DOCUMENT #** 1. Corporation Name

H72784

(2)

WHITER	IOCK, INC.								
Principal Place of	of Business	Mailing Address					UIUI UFAII D	IBIE BIBN BIBN Q	AUCI DIUIT 1001
% FOGER A. BRIDGES 334 MINORCA AVE STE 200 CORAL GABLES FL 33134		% FOGER A. BRIDGES 334 MINORCA AVE., STE 200 CORAL GABLES FL 33134							
COMAL GABLE	:5 FL 33134	COMME OMBLES TE 331	COMME ONDEES TE SSISM			3. Date Incorporated or Qualified 3a. Date of Last Report 08/23/1985 08/14/1995			,
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				59-2576677			Not Applicable Additional
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		, -	Required
City & State		Oity & State				6. Election Campaign Financing			May Be
23		28	T			Trust Fund Contribution			to Fees
Zip 24	Country 25	Zη;	Gour 30	itry		8. This corporation has liability for Florida Statutes	inangibie   DNo	tax unitier 5	199.002,
	9. Name and Address of Currer	1				10. Name and Address of New F	legistere	d Agent	
				81	Name				
	, ROGER A.		82 Street Addre			ess (P.O. Box Number is Not Acceptal	ıle)		
334 MINO SUITE 20	ORCA AVENUE		+	83					
	AABLES FL 33134		Ĺ						
			İ	84	1		F	L	Code
or registere familiar with	ed agent, or both, in the State of Flori h, and accept the obligations of, Sec	id.) Such change was authorizi tion 607.0505, Florida Statutes	ea by the c	Orga	ioration's boai	ration submits this statement for the pured of directors. I hereby accept the app	pointment	as registered	agent Lam
12.	Signature, typed or printed trains of registeristage.  OFFICERS AN	ra one drappinate 202 ID DERECTORS	113.	A.J.	it signative require	d wher ministratings ADDITIONS/CHANGES TO OFF			RS IN 12
THILE	PD	DELFTE	1.170	lLi				☐ Change	Addition
NAME	CHERNOFF, TOM		1.2 NA	ME					
STREET ADDRESS	3100 NE 48TH STREET				LADORESS				
City -St - ZiP Title	FT. LAUDERDALE FL VP	[7] DELETE	2 1 Ti		S!-7P			Change	Addition
NAME	CHERNOFF, PAULETTE		22 NA						_
STREET ALIOPESS	3100 NE 48TH ST.		2381	REET	TADORESS				
CITY - ST - ZIP	FT. LAUDERDALE FL				S1 - <b>Z</b> IP				
TITLE		☐ DELETE	3 1 11					☐ Change	Addition
NAME STREET ADDRESS	i		32 NA		LADDRESS .				
City-ST-ZIF					ST - ZIF				
TITLE		☐ DELETE	4 1 7	T( F				☐ Change	☐ Addition
NAME			4 2 N <sup>4</sup>						
STREET ADDRESS					LADORESS				
CITY - ST - ZIP TITLE		☐ DELETE	5 1 U		S1- ZIP			Change	Addit-or
NAME			5 2 N	ME				•	
STREET ADDRESS			53.83	REFI	T ADORESS				
C(TY-ST-ZIP					ST-ZIF				(T) p331.7.
TIFLE		☐ DEL€TE	6 1 1					☐ Change	Addition
NAME CORECT ADDOLSES			62%		LADORESS				
STREET ADDRESS CITY-ST-ZIP					SI-ZP				
14. I do hereb certify that path; that	the information indicated on this are	nus' report or supplemental ann pration or the receiver or troste	nished and nual report i se empowe	doe	es not qualify	for the exemption stated in Section 11 ate and that my signature shall have th his report as required by Chapter 607. I	e same le	dai eneccas i	i made under
SIGNAT	$\Omega \cap \mathcal{U}$	OR PRINTED NAME OF SIGNING	ER OR DIREC	ron	Ph	5/2/96	9.	14-461	-0360