

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H91625** (4)

1. Corporation Name

GWENEL, INC.



Principal Place of Business

**732 NE 3RD ST
POMPANO BCH FL 33060**

Mailing Address

**732 NE 3RD ST
POMPANO BCH FL 33060**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**LARCHE, JR J
2780 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33306**

81 Name

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

83

84 City

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 the date of filing

(PRINT) Registered Agent Signature and date of filing

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	CHESHIRE, ANGIE M.	
STREET ADDRESS	732 N.E. 3 STREET	
CITY-STATE-ZIP	POMPANO BCH. FL	
TITLE	VST	☐ DELETE
NAME	CHESHIRE, W.W.	
STREET ADDRESS	732 N.E. 3 STREET	
CITY-STATE-ZIP	POMPANO BCH. FL	
TITLE	AST	☐ DELETE
NAME	COLLIER, GWEN C.	
STREET ADDRESS	71 S.E. FOURTH AVENUE	
CITY-STATE-ZIP	DEERFIELD BCH. FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-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-STATE-ZIP	☐ Change ☐ Addition
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	☐ Change ☐ Addition
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	☐ Change ☐ Addition
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	☐ Change ☐ Addition
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	☐ Change ☐ Addition
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 16 1996 305942 6380
DATE DAY AND PHONE NUMBER

CR2E034 (12/95)