

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J87998 (7)
 1. Corporation Name
WISTERIA OF PALM BEACH, INC



Principal Place of Business 3101 PGA BLVD #J207 PALM BCH GARDENS FL 33410 US	Mailing Address 850 NW 57 CT FT LAUDERDALE FL 33309 US
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DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
08/17/1987

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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4. FEI Number 59-2836838	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
GORZECK, RANA M. P.A.
TRDE CENTRE SOUTH, STE 865
100 WEST CYPRESS CREEK RD
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent
81 Name **Cindy Wallick**
82 Street Address (P.O. Box Number is Not Acceptable)
12 East Davie Blvd.
83
84 City **Ft. Lauderdale** **FL** **85** Zip Code **33316**

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 607.009, Florida Statutes.
 SIGNATURE: *Cynthia Wallick* DATE: **4/29/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALICK, CINTHIA 2305 BAY DRIVE POMPANO BEACH FL	<input type="checkbox"/> DELETE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12 EAST DAVIE BLVD.
 FT. LAUDERDALE, FL 33316

14. I 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: *Cynthia Wallick* DATE: **4/29/98** (954) 462-6210

CR2E034 (10/97)