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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

, , , , ,	1996	OIII		DI	Secretary of State DIVISION OF CORPORATIONS							
DOCUMENT # K01226 (5)												
WORT	TH REALT	y and	MANAGEME	NT COMPAN	NY, INC.							
Direct of Bi			····································								 	
Principal Place of Business 6801 LAKE WORTH RD SUITE 114				Mailing Address				4 TOBIDATE OIL ODIOL TIRIO (1948 (1961)	I BARK BYDAN DYDAN		(1 010 01 0	
				6801 LAKE WORTH RD Suite 114 Lake worth FL 33467								
LAKE WORTH FL 33467 US												
				US				3. Date incorporated or Qualified 11/06/1987	3a. Date o		-1	
2. Principal P	Place of Busine	988		2a. Mailing Ac	Idress			4. FEI Number	1 00/	<u>/01/19</u>	Applied For	
Suite, Apt.	#, etc.			Suite, Apt	+ nto			65-0015745	<u></u> .		Not Applicable	e)
22				27	H, etc.			5. Certificate of Status Desired			5 Additional	
City & Stat	е			City & Sta	te	·		6. Election Campaign Financing			Required May Be	
23 Zip		Court		28 Zip	·			Trust Fund Contribution		Adde	ed to Fees	
24		25		29	<u> </u>	Countr	ý.	This corporation has liability for in Florida Statutes	ntangible tax	under s	199.032,	
· · · · · · · · · · · · · · · · · · ·	9. Name	and Add	ress of Current	Registered Ager	ıt			10. Name and Address of New R		 Jent		
OCTTO	N 6770 - 1470 - 14					81	Name					
RETTER	iuto, Willi Ke Worth	AMIC.				82	Street Add	dress (P.O. Box Number is Not Acceptabl	e)	·		-
SUITE 1		טח ו				83	·					
	ORTH FL 3	3467										-
44-5			···			84					p Code	
or register	to the provisio led agent, or b	ns of Sect both, in the	tions 607.0502 a 8 State of Florida	nd 607.1508, Flor Such change wa	ida Statutes, is authorized	the above	named corpo	oration submits this statement for the purp and of directors. Thereby accept the appo	ose of chang	L Jing its r	registered offic	e
igitili ar wi	th, and accep	t the oblig	ations of, Saution	607.0505, Fjorid.	a Statutes.	by the corp.	rusudut 2 OO	ard of directors. I hereby accept the appo	intriient as re	gistered	agent Lam	
SIGNATURE .	Styruture types or	protect name	of registered agent and	Este d'apple altre	Wille I	Et as less dans	ten steller	est with a consistency				i
12.		(OFFICERS AND I			13.	. organic at the plan	ADDITIONS/CHANGES TO OFFIC	CAN DERS AND D	RECIC	DES IN 12	
TITLE NAME	DETTECH	(TO 11/11		☐ DE	EL E TE	1 1 THLE				Change	Addition	┪
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NAME						2.2 NAME			□ '	Change	Addition	
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CHY-ST-ZIP TITLE					TEXE	24 CHY-S	I - 20°					
NAME				□ D€	1616	3 1 TITLE 3.2 NAME	ļ			Change	Addition	
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CITY - ST - ZIP						3 4 CITY - S						
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NAME						5.2 NAME			[] (hange	☐ Addition	
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TREET ADDRESS						6.2 NAME 6.3 STREET A	fifiance					
ITY-ST-ZIP						64 City-St						
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14. I do hereby certify that the information supplied with this fitting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: WILLIAM C. PETTERVIO

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