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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K32861

(2)

Mailing Address

WILCO SUPPLY CO., INC.

Principal Place of Business

FILED
May 08 1997 8:00am
Secretary of State

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6278 N FED HWY STE 401 FT LAUDERDALE FL 33308 US						6278 N FED HWY STE 401 FT LAUDERDALE FL 33308-1916 US						3	3. Date Incorporated or Qualified 3a. Date of Last Report 08/29/1988 06/13/1996						eport		
	2. Principal Place of Business						26. Mailing Address						4.		El Number 65-0073876		<u></u>			pplied For ot Applicable	
21	Sulte, Apt. #, etc.					26 Suite, Apt. #, etc.					SR 75 Addition										
22						27						b). G	ertificate of Status [Desirea	LJ			equired		
23	City & State					City & State						Tr			lection Campaign Fi rust Fund Contributi	on			dded	May Be to Fees	
24	Zip	Country 25					Zip Country 30						8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sigma\) Yes \(\sigma\) No								
	9. Name and Address of Current Registered Agent												10. Name and Address of New Registered Agent								
	WILLEY SR., JOHN A.											Name									
6278 N FEDERAL HWY STE 401										82	3	Street Add	dress ((P.O). Box Number is No	ot Accept	able)				
		LAUDERDA	NE I	FL 33308						83											
										84	7	City		••••			FL	85	Zip	Code	
11.	office or re agent. I ar	egistered ac	aent.	or both, in the	State of F	Horid	07.1508, Florid da. Such chan f, Section 607.	ge was a	uthorize	d by	v th	named co ne corpor	rporation's	ion s boa	submits this stateme and of directors. I he	ent for the ereby acc	Durnose o	of char pointm	nging it ent as	s registered registered	
SIG	BNATURE .	Signature, typed	or pri	nted name of registe	red agent an	id tillo	if applicable.	(NOTE	: Register	ed Age	ent e	signature req	uired who	ion rei	inslating)		DATE				
12.				OFFICER	S AND D	IRE (C1ORS		13.					AD	DITIONS/CHANGES	S TO OFF	ICERS AN	D DIRI	CTOF	IS IN 12	
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	(-ST-ZIP	v certify the	t the	information su	innlied w	ith th	nie filing doge	not qualif		HY-S			ed in S	Secti	ion 119.07(3)(i), Flor	rida Statu	tes I furthe	or certi	fy that	the	

4. 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 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 problem or true proposed to execute this feport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if Alangoli, or on the problem with an address.

SIGNATURE: MULA (2 1/2) WOLL DOWN A NO. 1 010 5/1/97 (954) 772-745