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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90222 043 ***150.00

DOCUMENT	#	1437	41
1. Corporation Name			• •

L W H, I	NG.									
Principal Place	of Business	Mailing Address			-		1) 6 2 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1	1197 91911 911		. 61611 -1211 1001
3111 N. ANDRE	WS AVENUE	3111 N. ANDREWS AVENUE								
BUILDING 2		BUILDING 2					DO NOT WRITE	IN THIS	SDACE	
ft. Lauderdai	LE FL 33309	FT. LAUDERDALE FL 33309				<u> </u>	Date Incorporated or Qualifed	IN ITIO	JEAUL.	
							01/16/1990			
2. Principal Pl	ace of Business	2a. Mailing Address			··		FEI Number		L A	pplied For
21						ļ	<u>65-0185800 </u>			lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certifcate of Status Desired		+	Additional Required -
City & State	9	City & State					Election Campaign Financing		•	May Be
23		28				-	Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	′			This corporation owes the currer	nt year Inta	angible □Yes	□No
24	25	29 30	0				Personal Property Tax.			
	9. Name and Address of Currer	nt Registered Agent	81		Vame	10.	Name and Address of New Re	gistered	rgent	
COH	IN. ALAN B.			} `						
2021 TYLER STREET HOLLYWOOD FL 33020		82	82 Street Addre			O. Box Number is Not Acceptab	le)			
										
HOL	LIWOOD FE 33020		83	1						1
	•		84	1	City			FL	85 Zip	Code
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was autrations of, Section 607.0505, Florid	norized by la Statutes	tne s.	e corporation	18 00	ard of directors. Thereby accept	ше арроп	changing it itment as r	ls registered registered
	Signature, typed or printed name of registered age			nt się	gnature required		instating) ADDITIONS/CHANGES TO OFFI	DATE	D DIDECT	ODC IN 12
12.		ND DIRECTORS ☐ DELETE	13.				ADDITIONS/CHANGES TO OFFI	CERS AN	☐ Change	
TITLE	PTS	€ DECE IE	1.1 TITLE							
NAME -	LANGSTROTH, RUSSELL H.		1.2 NAME		ļ					
STREET ADDRESS	3111 N. ANDREWS AVE., #1		1.3 STREE		-					
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP		IP				Change	Addition
TITLE	VP	☐ DELETE	2.1 TITLE						[_] Criange	Addition
NAME	LANGSTROTH, WENDY K.		2.2 NAME							
STREET ADDRESS	3111-N. ANDREWS AVE., #1		· 2.3 STREE	TAD	DORESS	<u></u> -				
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-5	ST-Z	rip					
TITLE		☐ DELETE	3.1 TITLE						Change	Addition
NAME			3.2 NAME							

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, with all other line empowered.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CiTY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

(DELETE

DELETE

☐ DELETE

SIGNATURE:

NAME

TITLE

NAME

TITLE ~

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY+ST-ZIP

Addition

☐ Addition

☐ Addition

☐ Change

☐ Change

☐ Change