


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

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L44433** (5)
1. Corporation Name
W & A GROUP, INC.



Principal Place of Business 3111 UNIVERSITY DRIVE SUITE 700 CORAL SPRINGS FL 33065 US	Mailing Address 3111 UNIVERSITY DRIVE SUITE 700 CORAL SPRINGS FL 33065 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 01/19/1990	3a. Date of Last Report 05/01/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0173015	Applied For <input type="checkbox"/> Not Applicable
City & State 23	City & State 28	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
Zip 24	Country 25	Zip 29	Country 30

9. Name and Address of Current Registered Agent WITZEL, ROBERT C 7459 NW 34 ST STE. 100 LAUDERHILL FL 33319		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DVS	<input type="checkbox"/> DELETE	1.1 TITLE WITZEL, ROBERT C.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WITZEL, ROBERT C.		1.2 NAME	
STREET ADDRESS 7459 NW 34 ST		1.3 STREET ADDRESS	
CITY-ST-ZIP LAUDERHILL FL		1.4 CITY-ST-ZIP	
TITLE DP	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SCHMIDT, JOANNE M.		2.2 NAME	
STREET ADDRESS 9451 NW 44 PLACE		2.3 STREET ADDRESS	
CITY-ST-ZIP CORAL SPRINGS FL		2.4 CITY-ST-ZIP	
TITLE T	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WITZEL, ROBERT C.		3.2 NAME	
STREET ADDRESS 7459 NW 34 ST		3.3 STREET ADDRESS	
CITY-ST-ZIP LAUDERHILL FL		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: **Robert C. Witzel** *[Signature]* **4/30/97** **254-340-6670**

CR2E034 (9/96)