1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

	MENT # L44590			
1. Corporation	n Name			
W- AA- IM	VESTMENTS, INC.			r commert din dien dient dien derin von den dien bid 2001 ziget die 1001 bid 1001 bid 1001
Principal Place	e of Business	Mailing Address	· ·	
1065 NE 125 S		1065 NE 125 ST		
SUITE 207 SUITE 207				DO NOT INDITE IN THE COACE
N MIAMI FL 33	161	N MIAMI FL 33161		DO NOT WRITE IN THIS SPACE
υεί		US		3. Date Incorporated or Qualifed
0.0-111-0	1 Duralman	2a. Mailing Address		01/24/1990 4. FEI Number Applied For
<u> </u>				
		Suite, Apt. #, etc.	es leach por	\$8.75 Additional
22 27				5. Certificate of Status Desired
		City & State		6. Election Campaign Financing \$5.00 May Be
		28 FRUITLAND PARI	K FL <	Trust Fund Contribution Added to Fees
Zip Country Zip			Country	8. This corporation owes the current year Intangible
24 3473	3 / 25	29 34731 30	<u> </u>	Personal Property Tax. XYes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
WAD	NOEN HADOLD		81 Name	·
WARREN, HAROLD 1005 Nr. 105TN CT 82 Street Addr				Address (P.O. Box Number is Not Acceptable)
1065 NE 125TH ST SUITE 207				12 MICRO RACETRACK ROAD
N MIAMI FL 33161			83	
84 City				85 Zip Code
			FRUIT	LAND PARK FL 34731
office or n	egistered agent, or both, in the State of	t Florida. Such chande was auth	iorized by the corbo	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.	
SIGNATURE		CHOTE: D.	egistered Agent signature re	equired when reinstating) DATE
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	President Schange Addition
NAME	WARREN, HAROLD		1.2 NAME	Warren, Harold
STREET ADDRESS	1065 NE 125TH ST #207		1.3 STREET ADDRESS	367 MICHO RACETRACK ROAD
CITY-ST-ZIP	N MIAMI BEACH FL 33161		1.4 CITY-ST-ZIP	FRUITLAND PARK FL 34731
TITLE	VPS	☐ DELETE	2.1 TITLE	V P.S
NAME	WARREN, CYLVIA		2.2 NAME	Warren, Cylvia
STREET ADDRESS	1065 NE 125TH ST #207		2.3 STREET ADDRESS	Warren, Cylvia 36712 MICRO RACETRACK ROAD
CITY-ST-ZIP	N. MIAMI BEACH FL 33161	:	2.4 CITY-ST-ZIP	FRUTTLAND BARK FL 34731
TITLE	VPS	☐ DELETE	3.1 TITLE	VPS ☐ Change ☐ Addition
NAME	SKAVRONECK, RHODA		3.2 NAME	Skarroneck, Rhoda
STREET ADDRESS	1065 NE 125TH ST #207_		'3.3 STREET ADDRESS	36712 MICHO RACETRACK KOAD
CITY-ST-ZIP	N. MIAMI BEACH FL 33161		3.4. CITY-ST-ZIP	FRUITIAND DARK FL 34731
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4, 2 NAME	
STREET ADDRESS	•		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
ΠΊΤLE	<u>'</u>	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		i	5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>	p=q,	5.4 CITY-ST-ZIP	
TITLE	, to	DELETE	6.1 TITLE	Change Addition
NAME	b.		6.2 NAME	
STREET ANDRESS	· · · · · · · · · · · · · · · · · · ·		6.3 STREET ADDRESS	

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 like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90002 016 ***150.00