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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L96246

(8)

1590 SEMINOLE BLVD. SEMINOLE FL 34648	11590 SEMINOLE BLVD. SEMINOLE FL 33778-3204	
Principal Place of Business	Mailing Address	

FILED May 07 1997 8:00am Secretary of State

WOLDSETH, INC. Principal Place of Business Mailing Address 11590 SEMINOLE BLVD. SEMINOLE FL 34648 SEMINOLE FL 33778-3204								
					Date Incorporated or Qualified 08/24/1990		te of Last R	eport
2. Principal Plac	ce of Business	2a. Mailing Addres	ss		4. FEI Number		Ar	plied For
21		26			59-3026850	·		t Applicable
Suite, Apt #.	, etc	Suite, Apt #, e	etc.		5. Certificate of Status Desired		\$8.75 / Fee Ro	
City & State		City & State			6. Election Campaign Financing		\$5,00	
23		28			Trust Fund Contribution		Added	
Zφ	Country	Zip	Country	/	8. This corporation has liability for	or intangible		
24	25	29	30		Florida Statutes	X Yes] No	
	9. Name and Address of Curr	rent Registered Agent		T ::	10. Name and Address of New	Registered /	Agent	
	SETH, JAMES R.		81	1	JAMES WOLDSE	n		
	SEMINOLE BLVD.		62	Street Add	Iress (P.O. Box Number is Not Accep	table	<u> </u>	
SEMIN	OLE FL 84648		83		9150 Jeminde	olna		
			[65					i
			84	City	<u> </u>	FL	85 Zip	Code Fn2
11 Pureusal to	the provisions of Sections 607.0	3602 and 607 1608 Florida	a Statutes, the about	e pomod cor	Seminale		changing it	5772
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office or reg	gistered agent, or both, in the Sta	ate of Florida, Such chang	e was authorized b	y the corpora	ation's board of directors. I hereby acc	cept the app	Omunent as	
	gistered agent, or both, in the Sta familiar with, and accept the ob	ate of Florida. Such chang digations of, Section 607.0	e was authorized b 505, Florida Statute	y the corpora s.	poration submits this statement for that ation's board of directors. I hereby acc	cept the app	omunem as	
SIGNATURE						DATE		
SIGNATURE 5	for abuse, typed or printed harrie of requisiered OFFICERS A		e was authorized b 505, Florida Statute (NOTE Registered Ag			DATE		
SIGNATURE 51	for acre, 150-d or printed name of registered OFFICERS A	agent and title if applicable.	(NOTE Registered Ag	ent signature requ	kred when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTOR	IS IN 12
SIGNATURE 51 12. TILLE 1	OFFICERS A DP WOLDSETH, JAMES R.	agent and title if applicable.	(NOTE Registered Ag	ent signatura requ	Ared when reinstating) ADDITIONS/CHANGES TO OFI JAMES WOLDSETH	DATE FICERS AND	DIRECTOR	IS IN 12
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information indicated on this annual report or supplemental annual report is rule and accurate and that my signature shall have the same legal enect as it made under on harm 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.