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FILED

Mar 05 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P30948

(4)

1. Corporation Name

WISMER*MARTIN, INC.



Principal Place of Business

Mailing Address

NORTH 12828 NEWPORT HIGHWAY
MEAD WA 99021NORTH 12828 NEWPORT HIGHWAY
MEAD WA 99021

3. Date Incorporated or Qualified

09/12/1990

3a. Date of Last Report

05/01/1996

4. FEI Number

91-1196514

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc

Suite, Apt #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

1. TITLE C ☒ DELETENAME HOLDEN, RONALD L
STREET ADDRESS N 12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE V ☐ DELETENAME MEHDI MOUSSAVI
STREET ADDRESS N12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE D ☒ DELETENAME MARTIN, GLEN E.
STREET ADDRESS NORTH 12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE PD ☒ DELETENAME PEREZ, JOHN
STREET ADDRESS N 12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE D ☒ DELETENAME ROBERT K. BUBLITZ
STREET ADDRESS N. 12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE D ☒ DELETENAME BARNES, CLARENCE H.
STREET ADDRESS NORTH 12828 NEWPORT HWY
CITY-ST-ZIP MEAD WA1. TITLE C ☐ Change ☒ AdditionNAME JEFFERY PICOWER
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 079502. TITLE PD ☐ Change ☒ AdditionNAME HANK GREEN
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 079503. TITLE SD ☐ Change ☒ AdditionNAME JACK MORTELL
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 079504. TITLE V ☐ Change ☒ AdditionNAME THOMAS WRABACK
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 079505. TITLE D ☐ Change ☒ AdditionNAME RUSS RICCI
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 079506. TITLE D ☐ Change ☒ AdditionNAME FREDERIC GREENBERG
STREET ADDRESS 1200 THE AMERICAN ROAD
CITY-ST-ZIP MORRIS PLAINS, NJ 07950

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:

Dan M. Kinsolving

2/28/97

(509)466-0396

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)