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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

4/9/96

407-362-2000

Apr 16 1996 8:00 am

1996

SIGNATURE:

Secretary of State P40856 DOCUMENT # WRG (DELAWARE) INC. Mailing Address Principal Place of Business ONE TOWN CENTER ROAD ONE TOWN CENTER ROAD **BOCA RATON FL 33486-1010 BOCA RATON FL 33486-1010** 3a. Date of Last Report 3. Date Incorporated or Qualified 04/28/1995 10/08/1992 Applied For 4. FEI Number 2a, Mailing Address 2. Principal Place of Business 65-0331979 Not Applicable 26 21 \$8.75 Additional Suite, Apt #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State П Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Country Zin Zip Yes No Florida Statutes 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 83 SUITE 105 TALLAHASSEE FL 32301 85 Zip Code 84 City 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 INOTE Registered Agent signature required when recistating-Signature, typed or printed name of registered agent and title it as purable. (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition Vice President X DELETE 1 1 THILE TITLE Alan D. Fiers 1.2 NAME SMITH, B.J. NAME 4000 N. River Street 5103 CORONADO RIDGE 1.3 STREET ADORESS STREET ADDRESS Arlington, VA 22207 Vice President & Treasurer □ Change **BOCA RATON FL** 1.4 CHY - ST - ZIP CITY-ST-ZIP X DELETE 2 1 THE TITLE **VPAT** 2.2 NAME Paul McMalion CHADER, G.H. NAME **60 RAVINE AVE** 2.3 STREET ADDRESS 6672 NW 98th Drive STREET ADDRESS WYCKOFF NJ Parkland, FL 33076 2.4 CHY S1-ZIP CITY-ST-ZIP Change ■ Addition ☐ DELETE 3 1 11TLE TITLE LAMM, R.B. 3.2 NAME NAME 3.3 STREET ADDRESS 2588 NW 64TH BLVD STREET ADDRESS **BOCA RATON FL** 3.4 CITY - ST - ZIP CITY-ST-ZIP Addition XI Change President & Director DELETE 4 1 TITLE THILE 4.2 NAME HOUCHIN, P.D. NAME 11900 NW 5TH STREET 4.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL** 4.4 CITY - ST - ZIP CITY - ST - ZIF ☐ Addition Change DELETE 5 1 TIFLE Director THTLE 5.2 NAME Mark Kreger 8213-B Thames Blvd. 5.3 STREET ADDRESS STREET ADDRESS 54 CITY - ST. ZiP <u>Boca Raton, FL 33433</u> CHTY-ST-ZIP Change Addition DELETE 6 1 THILE TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADORESS CITY-ST-7IP untarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further men i annual report is true and accurate and that my signature shall have the same legal effect as if made under er of trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name 14. I do hereby certify that the information supplied with th this annual reportion certify that the information indicated o oath; that I am an officer or dire appears in Block 12 or Block

SIGNING OFFICER OR DIRECTOR Paul McMahon