

5-5-97 B-6262 C
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FILED
May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000005325 (4)

1. Corporation Name
WWMTA, INC.



Principal Place of Business

402 HIGH POINT DRIVE
COCOA FL 32926

Mailing Address

505 N. ORLANDO AVENUE
4TH FLOOR
COCOA BEACH FL 32931-3166
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 402 High Point Dr

27 City & State

28 Cocoa FL

29 Zip 32926

Country

3. Date Incorporated or Qualified

01/22/1993

3a. Date of Last Report

04/17/1996

4. FEI Number

59-3195063

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

PEEPLES, JAMES W III
605 NORTH ORLANDO AVE.
COCOA BEACH FL 32932

10. Name and Address of New Registered Agent

81 Name Malcolm R. Kirschenbaum

82 Street Address (P.O. Box Number is Not Acceptable)
402 High Point Drive

83

84 City Cocoa

FL

85 Zip Code 32926

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 the applicable

(NOTE: Registered Agent signature required when reinstating)

4/17/97

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KIRSCHENBAUM, MALCOLM R.
STREET ADDRESS 402 HIGH POINT DRIVE
CITY-ST-ZIP COCOA FL

☐ DELETE

TITLE VSD
NAME DIDOMENICO, PATRICK E.
STREET ADDRESS 402 HIGH POINT DRIVE
CITY-ST-ZIP COCOA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, changed, or on an attachment with an address.

SIGNATURE

Patrick E. Didomenico 4/17/97 (632-4710)

CR2E034 (9/96)