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APPROVED AND FILED

CORPORATION ANNUAL REPORT 1995



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

55 MAY -1 AM 9:55

DOCUMENT # P93000007626 (3)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. Corporation Name WILKINSON ENTERPRISES, INC.

Principal Place of Business 264 OLD COUNTRY RD. WEST PALM BEACH FL 33414 Mailing Address 264 OLD COUNTRY RD. WEST PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/01/1993 3a. Date of Last Report 05/01/1994 4. FE Number 65-0403940 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 7. The corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address 21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc. 22. City & State 27. City & State 23. Zip 28. Zip 24. Country 29. Country 30. Country

9. Name and Address of Current Registered Agent WILKINSON, KEVIN D 264 OLD COUNTRY RD. WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent 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, this above-named corporation submits the 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 DATE

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: DPST, WILKINSON, KEVIN, 264 OLD COUNTRY RD., WEST PALM BEACH FL 33414.

Table with 2 columns: 1. TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. 2. Change, Addition. Rows 1-8.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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: Kevin D. Wilkinson Pres 4/28/95 407 6597622