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Feb 19 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 # P93000033652 (7)

1. Corporation Name

WEE WEE & COMPANY, INC.

Principal Place of Business

3764 HOWELL BRANCH RD.
WINTER PARK FL 32782
US

Mailing Address

P.O. BOX 82
GOLDENROD FL 32733-0082
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

05/06/1993

3a. Date of Last Report

05/14/1996

4. FEI Number

59-3189219

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

RYAN, GREGORY
7331 W. BLUE JACKET PL
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name Rosemarie Ryan
82 Street Address (P.O. Box Number is Not Acceptable)
7331 W. BLUE JACKET PL
83
84 City Winter Park FL 85 Zip Code 32792

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

Rosemarie Ryan Pres 2/11/97

12. OFFICERS AND DIRECTORS

TITLE P
NAME RYAN, GREGORY
STREET ADDRESS 7331 W BLUE JACKET PLACE
CITY-ST-ZIP WINTER PARK FL 32792

TITLE VP
NAME RYAN, ROSEMARIE
STREET ADDRESS 7331 W. BLUE JACKET PL.
CITY-ST-ZIP WINTER PARK FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P/S/D
2.2 NAME RYAN, ROSEMARIE
2.3 STREET ADDRESS 7331 W. Blue Jacket Pl.
2.4 CITY-ST-ZIP WINTER PARK FL 32792

3.1 TITLE V/T/D
3.2 NAME MCALLISTER, CONRAD O.
3.3 STREET ADDRESS 5440 FERROL DR.
3.4 CITY-ST-ZIP WINTER PARK, FL 32792

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Rosemarie Ryan 2/11/97 (402) 677-9669

CR2E034 (9/96)