FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000063035 (8) DOCUMENT #

WILLEATON INC

FILED May 20 1998 8:00am Secretary of State

WILAI	ON, INC.					
Principal Place of Business		Mailing Address			s reduced and toke start deret about desit desit desit dies saur desit desit selle	1001
2519 NW 38TH STREET MIAMI FL 33142		POST OFFICE BOX 196 HOLLYWOOD FL 33022 US			DO NOT WRITE IN THIS SPACE	
		•••			3. Date Incorporated or Qualified 09/09/1993	
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number Applied 65-0434605 Not App	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Addition Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May I Trust Fund Contribution Added to Fee	
Zip 24	Country 25	Ζ(ρ 29]	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	le
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent	
	DLECKI, ROBERT J. O RODMAN STREET		8		reet Address (P.O. Box Number is Not Acceptable)	
HO	LYWODD FL 33023				Action (F.C. Dox Hallings is 140)	
			84	City	ty 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.060	02 and 607,1508, Florida Statu	ites, the above	/e-named	med corporation submits this statement for the purpose of changing its regis	istered
agent. Lar	o giste red agent, or both, in the State in fam iliar with, and accept the oblig	of Florida, Such change was ations of, Section 607.0505, F	authorized b Iorida Statute	y the co es.	corporation's troard of directors. I hereby accept the appointment as regist	ered
SIGNATURE .	Sig ostu re, typed or porteo name of registerest ago	est and ble if applicable (NO	TE Registered A	jeni s gnalui	nature required whou reinstating] DATE	
12,		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	PST		TE 1.1 TITLE V			Addition
NAME SIEDLECKI, ROBERT J.			1.2 NAME		CYNTHIA H SIEDLECKI	
STREET ADDRESS 5890 RODMAN STREET		1.3 STREET ADDRESS		T ADDRESS	5840 RODMAN ST 40164000, FL 33023	Ī
CITY-ST-ZIP	HOLLYWOOD FL		1,4 CITY -	ST-ZIP	Hollywoo, FL 33023	
TITLE	VI	☐ DELFTE	2 1 Tille			Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS		ESS	
CITY-ST-ZIP			2. 4 CITY-S1-ZIP			
TITLE		☐ DEL€TE	D. I Tille		Change A	Addition
NAME CONTENT ADDRESS			3.2 NAMI			
STREET ADDRESS				T ADDRESS		j
CITY-ST-ZIP		DELETE	3.4. C/TY-	S1-ZIP		Addition
NAME		☐ octc1:	4 2 NAME			Audillon
STREET ADORESS				i address	rec	Ì
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE	31-21		Addition
NAME			5.2 NAME			
STREET ADDRESS			1	T ADDRESS	FSS	
CITY-ST-ZIP			5.4 CITY -			
TITLE		DELETE	6.1 FITLE		Change A	Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS	ESS	
CITY-ST-ZIP			6.4 CITY-			
	ertify that the information supplied w	ith this filing does not qualify f			stated in Section 119.07(3)(i), Florida Statutes. I further certify that the inform	nation

indicated on this annual report or supply mediate missing oces not quanty or ne exemption stated in section 1 1907(3)(i), Florida statutes. Further certify that the informatic indicated on this annual report or supply microtal 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