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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300064456 (5)

WITNESS 2, INC.

Principal Place of Business Mailing Address 2816 N.E. 26TH COURT 2818 N.E. 26TH COURT SUITE 105 SUITE 105 FT. LAUDERDALE FL 93306-1907 FT. LAUDERDALE FL 33306 U\$ 3a. Date of Last Report 3. Date Incorporated or Qualified 09/15/1993 03/18/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0405961 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country ZID This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 STEINBERG, ARNOLD Y 6971 N FEDERAL HWY SUITE 105 **BOCA RATON FL 33487** DERDA 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. **PSTD** DELETE Change Addition 1.1 TITLE TITL F WAGNER, L. REGINALD NAME 1.2 NAME 2816 N.E. 26TH COURT STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-7P DELETE 3.1 TITLE ☐ Change ■ Addition TITLE 32 NAME NAME STREET ADDRESS **33 STREET ADDRESS** 34. CiTY+ST-ZiP CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADORESS 5.4 CITY - ST - ZIP CITY-ST-2IP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

64 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 true receiver of 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 cha

6.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR

FILED

Feb 11 1997 8:00am

Secretary of State