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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000073811 (0)

AGING Principal Place	WILD GUYS, INC.	Mailing Address				1888 HAV IIIN HAV HAV HAV
8211 WEST BROWARD BLVD.		8211 WEST BROWARD	8211 WEST BROWARD BLVD.			
PH4 PLANTATION FL 33324		PH4		DO NOT WRITE IN TH	IIC CDACE	
		PLANTATION FL 33324			3. Date Incorporated or Qualified	
					10/25/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
1]		26		65-0455502	Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional	
2		[27]			Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	Z(p) Country		,	Trust Fund Contribution L.J Added to Fees 8. This corporation owes or has paid the current year Intangible	
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr		1301		10. Name and Address of New Registered Agent	
KA	HN, ROBERT M ESO.	, 1 , <u>.</u> .	81	Name		
	11 WEST BROWARD BLVD.		82	Street Arid	ress (P,O. Box Number is Not Acceptable)	
PH			02	Olitel Add	ress (1.0. box Humber is Not Acceptable)	
PL	ANTATION FL 33324		83			
1	1			City		85 Zip Code
 Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statute office or registered agent, or both, in the State of Florida. Such change was agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida. 			84	l ′		L
SIGNATURE	Stycatore typical or product name of registered OFFICERS A	agent and the diappositible (NO	Off Registered Age	ant signature requi	red when reinstating) CATI ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD DECET		1 1 TITLE			Change Addition
NAME	Kahn, Robert M		1.2 NAME			
STREET ADDRESS C/O 8211 W. BROWARD BL		LVD. PH-4	1.3 STAEET	ADDRESS		
CITY S1 - ZIP	PLANTATION FL 33324		1.4 CfTY - S	IT-ZIP		
TITLE	VP	☐ DELETE	2.1 ₹(11€			Change Addition
NAME	KAHN, ANDREA P	11m 044	2.2 NAME			
STREET ADDRESS	C/O 8211 W. BROWARD B PLANTATION FL	LYU., F9·4	2 3 STREET			
CITY - ST - ZIP	1 PATIVION LE	DELFTE	2. 4 City-5 3.1 Title	51-ZIP		Change Addition
NAME				1		mil winding and state (101)
STREET ADDRESS			3.2 NAME 3.3 STREET	ADORESS		
CITY-ST-ZIP			34 CITY-S			
TITLE	DELETE		4 1 TITLE			Change Addition
NAME			4 2 NAME			
STREE! ADDRESS			4 3 STHEET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		
TOLE	DELETE		5.1 TITLE			Change Addition
NAME	NE		52 NAME			
STREET ADORESS			5.3 STREET			
CITY-ST-ZIP	 	T Stiere	5 4 CITY - S	1-ZIP		Change 144201-
TITLE		DELETE	6 1 TITLE	f		Change Addition
NAME			6 2 NAME			
STREET ADDRESS			63 STREET	ADDRESS		

14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same logal 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 the officers.

SIGNATURE:

SIGNATURE:

FILED

Apr 30 1998 8:00am

Secretary of State