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

P93000079440 (2) DOCUMENT #

WYNKEN INC.

FILED Apr 24 1998 8:00am Secretary of State

		<u> </u>			I FOOITON IND NAME WHILL BOWN BOWN BOWN FOR A CONTRACTOR OF THE CONTRACTOR OF
Principal Place of	Business	Mailing Address	ling Address		
2526 CARTER GR		2526 CARTER GROVE CIR.			
WINDERMERE FL 34788		WINDERMERE FL 34786			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					11/12/1993
2. Principal Place	of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0452671 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23 28		28	<u> </u>		Trust Fund Contribution
Ζιρ	Country	Zip	Country	/	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. 📈 Yes 🗌 No
	Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
KENDRICK, GLENN S			81	Nam	ıme
2526 (CARTER GROVE CIR.		82	Stree	reet Address (P.O. Box Number is Not Acceptable)
WINDE	RMERE FL 34786				
			83	1	
			84	City	v 85 Zip Code
				′	" FL "
11. Pursuant to the	ne provisions of Sections 607.0502	and 607.1508, Florida Statu	ites the abov	e-name	med corporation submits this statement for the purpose of changing its registered
office or regis	stered agent, or both, in the State c amiliar with, and accept the obligal	of Florida. Such change was tions of, Section 607.0505, F	authorized b Torida Statute	y the ci S.	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE					•
SIGNATURE	nature, typied or printed name of registered agen	and little if applicable (NO	IF: Registered Ag	ent signat	nature required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	11 TITLE		NOTHANICL GLENN LANDRY 1ESS 2526, CORTER GROVE CIR.
	KENDRICK, GLENN S		1.2 NAME		NATHANIEL GIENN LANDRY
	2526 CARTER GROVE CIR.		1.3 STREE	T ADDRES	ESS 2526, CARTER GROVE CIRC
CITY-SF-ZIP	WINDERMERE FL 34786		14 CiTY-	ST-ZIP	Windermere Ti 34186
TITLE		☐ DELETE	21 TITLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREE	T ADDRES	ress
CITY-ST-ZIP			2.4 CITY-	ST-ZIP	·
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	T ADDRES	(ESS
CITY-ST-ZIP			3.4 CITY-	ST-ZIP	,
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADORES	NESS
CITY-ST-ZIP			4.4 CiTY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	T ADDRES	NESS
CITY-ST-ZIP			54 CITY-		· •
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE		RESS
CITY-ST-7IP			6.4 CITY-	ST-ZIP	
14. I hereby cert	ify that the information supplied wi	th this filing does not qualify	for the exem	ption st	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.