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 #

P93000088560 (6)

W.O.S.E., INC.

FILED Feb 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- F (BB) BB) 110 10 10 11 11 10 11 10 11 10 11 10 11 10 11 10 11 10 11		1011 4.0 11 18.01	
712 U.S. HIGHWAY ONE 712 U.S. HIGHWAY ONE							
N. PALM BEACH FL 33408 N. PALM BEACH FL 33408					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	IN THIS SPACE	 -
					12/29/1993		
2. Principal Place of Business	2a, Mailing Address				4. FEI Number	A ₁	pplied For
21	26				65-0479673	 	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	Additional
27					5. Certificate of Status Desired	Fee R	equired
City & State City & State					6. Election Campaign Financing		May Be
23	28				Trust Fund Contribution		to Fees
Zip Country	Zip	Country			8. This corporation owes or has paid the current year lotangible Personal Property Tax due June 30. Yes		
	25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent		
	ent Registered Agent		31 Nam		10, Italia and Address of Italian risg	natorou Agont	
NORRIS, DAVID B							
712 U.S. HIGHWAY ONE N. PALM BEACH FL 33408			32 Stree	t Addres	ss (P.O. Box Number is Not Acceptable	e)	
N. PALM BEAUTI PL 33400		l l	33				
						12-1-5-	0-3-
			City			FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	, the abo	ove-name	d corpo	pration submits this statement for the pu	rpose of changing i	ts registered
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obline.	te of Florida. Such change was au igations of, Section 607,0505, Flori	thorized da Statu	by the co tes.	rporatio	in's board of directors. I hereby accept	the appointment as	registered
SIGNATURE Signature, typed or printed name of registered:	agent and title if applicable. (NOTE:	Registered	Agent signat	re required	d when reinstating)	DATE	
	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR Change	RS IN 12
SPTD STANDARD OF ALIDIA	DELETE 1.1 T			1			LLI Addition
NAME TUCHSCHER, CLAUDIA		1.2 NAN					
STREET ADDRESS 3375 HERMAN AVE SAN DIEGO CA			EET ADDRESS	'			
5,11 01 21	DELETE	1.4 CITY 2.1 TITL	(-ST-ZIP	 		Change	Addition
TITLE	beerie					Car officings	
NAME		2.2 NAN		,]			
STREET ADDRESS			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	2.41 DELETE 3.17			+	,	Change	Addition
			3.2 NAME				_
NAME etpect annibece		1	eet address	: 1			
STREET ADDRESS CITY-ST-ZIP		1	Y-\$T-ZIP				}
TITLE	DELETE	4.1 Titl				☐ Change	Addition
NAME		4, 2 NA	ME				
STREET ADDRESS		4.3 STR	eet address	3			
CITY-ST-ZIP		4.4 CITY-ST-2					
TITLE	DELETE	5.1 TITLE				☐ Change	Addition
NAME		5.2 NAME					
STREET ADDRESS		5.3 STR	EET ADDRES	;			
CITY-ST-ZIP			Y-ST-ZIP				
TITLE	DELET E	6.1 1110				Change	Addition
NAME		6.2 NA	AE				
STREET ADDRESS		6.3 STR	EET ADDRES	s			
CITY-ST-ZIP		6.4 CIT	Y+ST-ZiP				
	of all the same and assettly the	45		AAA IA C	Contine 110 07/2\(ii) Florida Statutos I f	further earlify that the	o information

14. I 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 informatio indicated on this 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 attacking with an address.