

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 23 1998 8:00am
Secretary of State

DOCUMENT # **P94000015949 (8)**

1. Corporation Name

WHITELAND INVESTMENTS, INC.



Principal Place of Business

**430 WEST DILIDO DR
MIAMI BEACH FL 33139
US**

Mailing Address

**430 WEST DILIDO DR
MIAMI BEACH FL 33139
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1994

4. FEI Number

65-0470915

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 430 West Dilido Dr

22 Suite, Apt. #, etc. Miami Beach Fla

23 City & State Florida

24 Zip 33139

25 Country USA

2a. Mailing Address

26 430 West Dilido Dr

27 Suite, Apt. #, etc. Miami Beach Florida

28 City & State Miami Beach Florida

29 Zip 33139

30 Country USA

9. Name and Address of Current Registered Agent

**BLANCO, JULIO
430 WEST DILIDO DR
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PDS** ☐ DELETE

NAME **BLANCO, JULIO**
STREET ADDRESS **430 W. DILIDO DR.**
CITY-ST-ZIP **MIAMI BEACH FL**

TITLE ☐ DELETE

NAME *I am sorry but I*
STREET ADDRESS *never received my first*
CITY-ST-ZIP *notice. I received this*

TITLE ☐ DELETE

NAME *one only last week.*
STREET ADDRESS *I called to explain*
CITY-ST-ZIP *the girl said to*

TITLE ☐ DELETE

NAME *mail check for 150--*
STREET ADDRESS *and this explanation.*
CITY-ST-ZIP *Thank you Julio*

TITLE ☐ DELETE

NAME *and this explanation.*
STREET ADDRESS *Thank you Julio*
CITY-ST-ZIP *and this explanation.*

TITLE ☐ DELETE

NAME *and this explanation.*
STREET ADDRESS *Thank you Julio*
CITY-ST-ZIP *and this explanation.*

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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-07/24/98--01097--043
*****150.00**

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 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.

SIGNATURE

CR2E034 (5/98)