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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name WEL INO



DOCUMENT # P94000027570

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90029 006 ***150.00

Principal Place of Business Mailing Address						
Principal Place	of Business	Mailing Address				
•		-				·
2140 NE 146TH SUITE 204	IAVE	2140 NE 146 AVE SUITE 204				
SILVER SPRINGS FL 34488 SILVER SPRINGS FL 34488			В			DO NOT WRITE IN THIS SPACE
US		U\$				3. Date Incorporated or Qualifed 04/07/1994
2. Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For
21		26				59-3236046 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip Country			8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax.
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
	EW, THOMAS C JR			82	Street Add	dress (P.O. Box Number is Not Acceptable)
2801 SW COLLEGE ROAD SUITE 1				32	Direct Add	dross (F.O. Box Hamber is Hot Hoodpasie)
OCA	LA FL 33474			83		
						85 Zip Code
				84	City	FL 85 Zip Code
office of r	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	of Florida. Such change was a	authorized	י עמ ו	tne corporat	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	. Registered	Agent	t signature requir	ired when reinstating) DATE
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TI	ILE		☐ Change ☐ Addition
NAME	KAPP, VIRGIL E		1.2 NA	ME		
STREET ADDRESS	2140 NE 146TH AVENUE		1.3 \$7	REET	ADDRESS	
CITY-ST-ZIP	SILVER SPRINGS FL 34488		1.4 CI	TY-S7	r-ZIP	
TITLE	VP	☐ DELETE	2.1 TI	ΊE		☐ Change ☐ Addition
NAME	KAPP, JENNIFER A		2.2 NA	ME		
STREET ADDRESS	2140 NE 146TH AVE		2.3 ST	REET	ADDRESS	
CITY-ST-ZIP	SILVER SPRINGS FL 34488		2.4 C	TY-\$	T-ZIP	_
TITLE	ST	☐ DELETE	3.1 TI	ΠE		Change Addition
NAME	KAPP, DEBBIE		3.2 N/	ME	ĺ	
STREET ADDRESS	2140 NE 146TH AVE		3.3 \$1	REET	ADORESS	` \
CITY-ST-ZIP	SILVER SPRINGS FL 34488		3.4. C	ITY-S	T-ZiP	,1,
TITLE		☐ DELETE	4.1 TI	īl <u>E</u>		☐ Change ☐ Addition
NAME			4.2 N	AME		
STREET ADDRESS			4.3 ST	REET	ADDRESS	
CITY-ST-ZIP			4.4 CI			
TITLE		☐ DELETE	5.1 TI			☐ Change ☐ Addition
NAME			5.2 N			· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS			5.3 81	REET	ADORESS	
CITY-ST-ZIP	,		54 C	TY-S1	T-ZIP	
TITLE		☐ DELETE	6.1 TF			☐ Change ☐ Addition
NAME			6.2 N	ME		· _
STREET ADDRESS			6.3 ST	REET	ADDRESS	
			6.4 CI		į.	
CITY-ST-ZIP					· -	

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 thanged, or on an attachment with an address, with all other like empowered

SIGNATURE: