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Feb 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000045863 (5)

1. Corporation Name

WENDCORP OF SOUTH FLORIDA, INC.

Principal Place of Business

14808 S.W. 67TH LANE
MIAMI FL 33193

Mailing Address

14808 S.W. 67TH LANE
MIAMI FL 33193-2026



3. Date Incorporated or Qualified

06/20/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number

65-0516839

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEL BUSTO, JUAN
14808 S.W. 67TH LANE
MIAMI FL 33193

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME GONZALEZ, CATALINO E
STREET ADDRESS 14834 S.W. 67TH LANE
CITY-ST-ZIP MIAMI FL 33193

1.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME LYNN, RICHARD E
STREET ADDRESS 6250 S.W. 117TH TERRACE
CITY-ST-ZIP MIAMI FL 33156

2.1 TITLE ☐ Change ☐ Addition

TITLE TD ☐ DELETE

NAME DEL BUSTO, JUAN
STREET ADDRESS 14808 S.W. 67TH LANE
CITY-ST-ZIP MIAMI FL 33193

3.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME LORANT, KENNETH E
STREET ADDRESS 5817 S.W. 120TH AVE.
CITY-ST-ZIP COOPER CITY FL 33330

4.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME VINETAS, DEBRA C.
STREET ADDRESS 8999 SW 147TH PL
CITY-ST-ZIP MIAMI FL

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)