FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1990	DIVISION UF	CORPORATIONS		
DOCUMENT # P94000062254 (5) 1. Corporation Name					
GENE	WIRSBINSKI, INC.				
				A PROGRAM DIA PANCE DIA LACINI ACCINI	PANA BOUR BUILD WAN BUILD ALGE HERE
Principa! Place of Business Mailing Address					
1925 NORTH EAST 45TH STREET 1925 NORTH EAST 45TH			TH STREET		
SUITE 235 FORT LAUDERDALE FL 33308 SUITE 235 FORT LAUDERDALE FL 33308 SUITE 235 FORT LAUDERDALE FL 33					
			L 33308	3. Date Incorporated or Qualified	3a. Date of Last Report
				08/19/1994	05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt. #, etc.		26		65-0511724	Not Applicable
Suite, Apr. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		& Flaction Campaign Financiae	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	
24	25	29	30	Florida Statutes	
	9. Name and Address of Cui	rent Registered Agent		10. Name and Address of New R	egistered Agent
****	••••		81 Name		
HULL, JOHN H			B2 Street Addr	ress (P.O. Box Number is Not Acceptable	le)
2186369			83		
SUITE 235 FORT LAUDERDALE FL 33308					
PUNI D	NUDERDALE PL 33300		84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above-named corpor	ration submits this statement for the purp	
or registere familiar with	ed agent, or both, in the State of F h, and accept the obligations of S	lorida. Such change was authorize ection 607,0505. Florida Statutes	ed by the corporation's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	pintment as registered agent. I am
SIGNATURE	, and desopt the doingstone of a	ocion con lococ, i londa cialotos.	'		
	Signature, typed or printed name of registered a		TE: Registered Agent signature require		DATE
12. TITLE		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
NAM:	d Wirsbinski, gene	☐ DELETE	1. 1 TITLE		Change Addition
STREET ADDRESS			1.2 NAME 1.3 STREET ADDRESS		
CHTY-ST-ZIP	FORT LAUDERDALE FL 33		1.4 CITY - ST - ZIP		
TITLE	TOTAL DISSERBITE TE OF	DELETE	2 1 TITLE		Change Addition
NAME		_	2.2 NAME		3 • 3 • 1 • • • • •
S!REE ADORESS			2 3 STREET ADDRESS		
CITY - ST - ZIP			24 City-St-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3. STREET ADDRESS		
CHY+ST-ZIP THILE		DELETE	3.4 C!TY-ST-ZIP		
NAME			4. 1 TITLE		Change (Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		1
THLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		_ , ,
STREEL ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6. 1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplies	and with this files is used to the con-	64 CITY-ST-ZIP	or the exemption stated in Castina 110.6	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: ¥

4/25/96 Destine Prove .