

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000082879 (5)

1. Corporation Name

WISEU FINANCIAL CORPORATION



Principal Place of Business

Mailing Address

7921 N.W. SOUTH RIVER DR.  
SUITE 216  
MEDLEY FL 33166-2515

7921 N.W. SOUTH RIVER DR.  
SUITE 216  
MEDLEY FL 33166-2515

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
11/14/1994

3a. Date of Last Report  
03/17/1995

4. FEI Number 65-0550785  
APPLIED FOR

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

10. Name and Address of New Registered Agent

HESS, GEORGE F II  
333 NORTH NEW RIVER DR. EAST  
SUITE 2000  
FORT LAUDERDALE FL 33301

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 date of filing

NOTE: Registered Agent's signature required when changing

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME HESS, GEORGE F II  
STREET ADDRESS 333 N. NEW RIVER DR., EAST, STE. 2000  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, P, T ☒ Change ☒ Addition  
1.2 NAME Armenio Ferreira  
1.3 STREET ADDRESS 7921 N.W. South River Drive  
1.4 CITY-ST-ZIP Medley, FL 33166

2.1 TITLE D, VP, S ☐ Change ☒ Addition  
2.2 NAME Alexandre Interaminense  
2.3 STREET ADDRESS 7921 N.W. South River Drive  
2.4 CITY-ST-ZIP Medley, FL 33166

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS

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

800001877488  
-06/27/96--01018--014  
\*\*\*200.00

14. 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Day-Month-Year

4/26/96

301-883-4453

05/11/96

CR2E034 (12/95)