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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 13 1998 8:00am Secretary of State

Principal Place 3714 18TH SI BRADENTON	WEN ENTERPRISES, INC. e of Business freet w.	Mailing Address 3714 18TH STREET W. BRADENTON FL 34205			DO NOT WRITE IN THE  3. Date Incorporated or Qualified  11/14/1994  4. FEI Number	
Suite, Apt. #, etc.		26 Suite Ant # etc	·		65-0587337	Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the o	current year Intangible
24 25 29 29 9. Name and Address of Current Register		29   nt Registered Agent	30	0 Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent		Yes No
MC	KOWEN, GEORGE	······································	81	Name		
371	14 18TH STREET W.		82	Street A	ddress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34205			83			
				<u>                                     </u>		
			84	'	F	
SIGNATURE	Signature, typed or printed name of registered age				corporation submits this statement for the purpose oration's board of directors. I hereby accept the a equired when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTC DELETE		1.1 TITLE			Change Addition
NAME	MCKOWEN, GEORGE R		1.2 NAME			
STREET ADDRESS 8714-18TH ST WEST			1.3 STREET ADDRESS			
TITLE			2.1 TITLE	31-2IF		Change Addition
NAME			2.2 NAME			
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		2.3 STREFT ADDRESS			
CITY-ST-ZIP TITLE			2 4 CHY-	ST - ZIP		Change Addition
NAME			32 NAME	Ì		
STREET ADDRESS	RESS		3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE NAME	<b>I</b>		4.1 TITLE			Change Addition
STREET ADDRESS			4. 2 NAME	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE			5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP TITLE			5.4 CITY -: 6.1 TITLE	ST-ZIP		Change Addition
NAME		C) precit	6.2 NAME			ET CHANGE ET VOOI(10()
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			6.4 CITY -			

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.