## FILE NOW: FILING FEE AFTER MAY 1 JS \$225.00

PROFIT --CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Scoretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name P95000013023 (3)

WADE	CAPITAL, INC.				
Principal Place	of Business	Maring Address		I ICOLIDOR IIO IOIOI MISEE OBEIL DAILE BOLE	
7241 S.W. 168TH ST. 7241 S.W. 168TH ST. MIAMI FL 33157 MIAMI FL 33157					
				02/15/1995	a. Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		45-0056460	Not Applicable
Suite, Apt. #	t, €IC.	Suite, Apt. #, etc.		5. Certificate of Status Desired 🕏 🕏	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ziρ	Country	Ζφ	Country	8. This corporation has liability for intar	
24	25		30	Florida Statutes Yes	
	9. Name and Address of Curre	nt Registered Agent	81 Name .	10. Name and Address of New Regi	stered Agent
				INE D. VERNON	
	SOUTH FLORIDA REGISTERED AGENTS INC.			ress (P.O. Box Number is Not Acceptable)	
200 S. BISCAYNE BLVD. 4750 S.E. BANK BLDG.			83	1 30 100 01	
MIAMI F	L 33131		84 City Wil	ami. FL	FL 85 Zip Code 22/5/1
11. Pursuant to	a the provisions of Sections 607.050	2 and £07.1508, Florida Statutes,	the above named corpor	ation submits this statement for the purpos	e of changing its registered office
SIGNATURE _	ed agent, or both, in the State of Min, and accept the obligations of, Scr Synator, by adoptified name of registered age	Wnow	Try the corporation's boar	rd of directors. I hereby accept the appoint	nent as registered agent. Fam 6/24/96 toyle
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLÉ	D	☐ DELETE	1 4 Talle		Change Addition
NAME	vernon, william G		1.2 NAME		
STREET ADDRESS	7241 S.W. 168TH ST.		1.3 STREET ADDRESS		
CiTY+ST+ZIP	MIAMI FL 33157	ET COLOTE	1.4 C-TY - ST - Z1P		Change Addition
TITLE	0	CELETE	2.1317(8		Change C Addition
NAME	VERNON, JANE		2.2 NAME ;		
STREET ADDRESS	7241 S.W. 168TH ST.		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33157	DELETE	2.4 CHY - ST - ZIP 3.1 THUE		Change Addition
NAME			3.2 NAME		□ - 11-3· □ · 11-11-11
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIF			3.4 City-St. ZiP		
TITLE		DELETE	4 1 TIFLE		Change Addition
NAME		•	4.2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIF			4.4.C(1)Y-S1-Z(P		
TITLE		[] DELETE	5 1 11ftF	10000188	4 5 3 Clarge Addition
NAME .			5.2 NAME	-07/05/9601020	J- <b>-</b> U45
STREET ADDRESS			5.3 STREET ADDRESS	***225.00	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		[] DELETE	6 1 HRF		Change 5 4000
NAME			6.2 NAME		11-1-1

14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualfy 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP

SIGNATURE:

STREET ADDRESS

CHTY - ST - ZIP

MANUAL VILLAGIN JANE D. VERNON
MONATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E034 (12/95)