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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000018183 (0)

WELLINGTON SERVICE CORPORATION, INC.

1001 SOUTH BAYSHORE DRIVE SUITE 1604 MIAMI FL 33131 US		1001 SOUTH BAYSHORE SUITE 1604 MIAMI FL 33131-4639 US	MIAMI FL 33131-4839			Date Incorporated or Qualified     03/01/1995	3a. Date 05/21		leport
· 1	Place of Business	2a. Mailing Address	1			4. FEI Number	Applied For		
21		26				65-0561904		No	ot Applicable
Suite: Apt 22		Suite, Apt. #, etc. 27	27			6. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Sta	de	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Ζφ π.τ.•	Country	Zip	Country			6. This corporation has liability for intangible tax under s. 199.032,			
24	25	25     29     30   9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
		teur vafistaten Wöhlt	81	Ti	vame	10. Name and Address of New He	jistered Ag	ant	
	RDON, EUGENE C		"	'	vanie				
	1 SOUTH BAYSHORE DRIVE		82	82 Street Ac		dress (P.O. Box Number is Not Acceptable)			
	ITE 1604			P. C.					
MV	VMI FL 33131		83	'					
			84	1 0	City			85 Zip (	Code
				<u> </u>			FL		
office or	registered agent, or both, in the St am familiar with, and accept the of	late of Florida. Such change was oligations of, Section 607.0505, F	authorized b	v th	e corporation	ration submits this statement for the p on's board of directors. I hereby accep	t the appoin	tment as	registered
- CHETTE TO THE					ignature required	ired when reinstating) DATE			
12.	The second secon	AND DIRECTORS	13,			ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR	IS IN 12
Intf	PD DELETE		1.1 TITLE	1.1 TITLE				] Change	Addition
NAME	GORDON, EUGENE C		1.2 NAME						•
STREET ADDRESS	1001 S BAYSHORE DR., ST	TE 1604	1.3 STREE	T ADI	DRESS				
CITY+\$1+7#	MIAMI FL		1.4 CITY-ST-ZIP		IP .				
11/11		DELETE	2.1 TITLE					Change	Addition
NAME			22 NAME						
STREET ADDRESS			2.3 STREE	T AD(	DRESS				
CPY-ST-77			2. 4 CITY - ST - ZIP						
Title		DELETE	3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME						
STREET ADORESS			3.3 STREE	T ADO	DRESS				
CHY-ST-7-P			3.4. CITY-	ST-Z	ZIP				
THEF		4.1 TITLE	4.1 TITLE				Change	Addition	
NGME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	¥ AD(	DRESS				
CHY S1-7-P			4.4 CITY-1	S7 - Z	IP				
THE		5.1 TITLE	5.1 TITLE				Change	Addition	
NAML			52 NAME						
STREET ADDRESS			53 STREE	t adi	DRESS				
CHY-ST ZP		119 - 100.0	5.4 CITY-1	ST-Z	iP				
1 11 1		DELETE	61 TITLE					Change	Addition
NAME			62 NAME						
SEREST ADDRESS			63 STREE	t ade	DAESS				
CHY-ST 74			64 CITY-						
14. I do here	thy certify that the aformation sur-	olied with this filing does not qual	lify for the exe	emp	tion stated	in Section 119.07(3)(i), Florida Statutes ny signature shall have the same legal	. I further ce	rtify that	the
Lamanie	officer or director of the corporate	or the receiver or trusted empor	wered to exe	cute	e this report	ny signature shall have the same legal as required by Chapter 607, Florida Si	tatutes; and	made und that my r	aer oauri, inat name