

5-9-97 B- 6852 c
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000038488 (9)

1. Corporation Name

WHAT'S UP PRODUCTS, INC.

Principal Place of Business

16343 W. DIXIE HIGHWAY - #380
N. MIAMI BEACH FL 33160

Mailing Address

16343 W. DIXIE HIGHWAY - #380
N. MIAMI BEACH FL 33160-3708

3. Date Incorporated or Qualified 05/15/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0578645	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	

2. Principal Place of Business	2a. Mailing Address
21 2221 NE 164 ST Suite, Apt. #, etc. 360	26 SAME Suite, Apt. #, etc.
22 City & State NMB, FL	27 City & State
23 Zip 33160-3708	28 Zip 33160
24 Country	30 Country

9. Name and Address of Current Registered Agent

OTIS, RICHARD F
661 NE 125TH ST.
NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

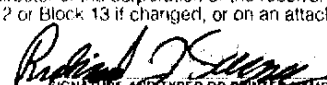
81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	BROCK, BRENDA L	1.2 NAME	Brock
STREET ADDRESS	16343 W. DIXIE HIGHWAY - #380	1.3 STREET ADDRESS	2221 NE 164 ST 360
CITY-ST-ZIP	N. MIAMI BEACH FL 33160	1.4 CITY-ST-ZIP	NMB, 33160-3708
TITLE	STD ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	SAYRE, RICHARD J	2.2 NAME	Sayre
STREET ADDRESS	16343 W. DIXIE HIGHWAY - #380	2.3 STREET ADDRESS	2221 NE 164 ST 360
CITY-ST-ZIP	N. MIAMI BEACH FL 33160	2.4 CITY-ST-ZIP	NMB, FL 33160-3708
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET 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		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:  DATE: 4/30/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (9/96)