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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P95000045575

W & A GROUP SERVICES, INC.

•									
Principal Place of Business . Mailing Address							49111 44111		
3111 UNIVERSI	TY DR	3111 UNIVERSITY DR							
SUITE 700		SUITE 700				DO NOT WRITE IN THIS SPACE			
CORAL SPRINGS FL 33065 US CORAL SPRINGS FL 33065						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
03		00				06/13/1995			}
A Principal D	lace of Business	2a. Mailing Address				4. FEI Number		T Anr	olied For
- i	lace of business	2a. Mailing Address				65-0596778			Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				00 0030110	7	\$8.75 A	
22	, cto.	27				5. Certifcate of Status Desired	\mathbf{Y}	Fee Red	
City & Stat		City & State			- ''	6. Election Campaign Financing		\$5.00	May Re
23	- ,	28				Trust Fund Contribution		Added to	· 1
Zip	Country	Zip	Cot	untry		8. This corporation owes the curren	nt vear Inta	angible	
24	25	29	30			Personal Property Tax.			□No
	9. Name and Address of Curr			T_{-}		10. Name and Address of New Re	gistered	Agent	
				81	Name				
WITZEL, ROBERT				82	Charat Addre	ess (P.O. Box Number is Not Acceptab	lo\		
7459	NW 34 STREET			62	Street Addre	ess (P.O. Box Number is Not Acceptab	ie;		
LAUI	DERHILL FL 33319			83	· · · · · · · · · · · · · · · · · · ·				
	•							Ta-1	
				84	City		FL	85 Zip C	,ode
office or r	egistered agent, or both, in the Stat m familiar with, and accept the obli- Signature, typed or printed name of registered a	te of Florida. Such change wa gations of, Section 607.0505,	s authorize Florida Stat	d by f tutes,	the corporation	pration submits this statement for the pin's board of directors. I hereby accept	the appoin	ntment as reç	gistered
12.		AND DIRECTORS	13.		t signotors required	ADDITIONS/CHANGES TO OFFI		D DIRECTO	RS IN 12
TITLE	P .	DELETE	1.1 7	ITLE		ADDITIONO (TANGED TO SET)	<u> </u>	Change	Addition
NAME	WITZEL, ROBERT		1.2 N	1.2 NAME					}
STREET ADDRESS	7459 NW 34 ST		i i		ADORESS				{
	CT AUDEDO ALE EL			ITY-ST					ļ
CITY-ST-ZIP TITLE			2.1 T		·ZIF			Change	Addition
NAME				2.2 NAME					_
	9451 NW 44 PLACE				ADDRESS				ŀ
STREET ADDRESS	CORAL SPRINGS FL				- 1				}
CITY-ST-ZIP TITLE	CONAL SI MINGS I E	☐ DELETE	3.1 T	ITY-ST	1-21	~		Change	Addition
NAME			3.2 N					_ ·	
STREET ADDRESS	,				ADDRESS				
				CITY-\$1	j				j
TITLE				1-24			Change	Addition	
				VAME					-
NAME .			l		ADDRESS				
STREET ADDRESS	,			ITY-ST	,				
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TITLE			5.1 s					+. Iding 4	
NAME.					ADDRESS	•			1
STREET ADDRESS	•			ITY-ST	·				
CITY-ST-ZIP	1		3,4 (41 I-Ol	** LIF]				1
πιε		☐ nei ete	6.1 T	ITLE				Change	Addition
NAME		☐ DELETE	6.1 T					Change	Addition

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, with all other like empowered.

6.4 CITY+ST-ZIP

SIGNATURE:

CITY-ST-ZIP

984-340-6670

FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90220 050 ***158.75