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Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000062368 (2)

1. Corporation Name
WENONE, INC.



Principal Place of Business
900 S.E. 17TH STREET
SUITE H
MIRAMAR FL 33316
US

Mailing Address
2620 BUTTWOOD
SUITE H
MIRAMAR FL 33025-2414
US

3. Date Incorporated or Qualified 08/14/1995
3a. Date of Last Report 05/01/1996

2. Principal Place of Business
21 900 S.E. 17th St.
Suite, Apt. #, etc.

2a. Mailing Address
26 145 Citrus Park Circle
Suite, Apt. #, etc.

4. FEI Number 65-0606361
Applied For Not Applicable

22 City & State
23 Ft. Lauderdale, FL

27 City & State
28 Boynton Beach, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 Zip 33316 Country US

28 Zip 33436 Country US

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33316 25 US

29 33436 30 US

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LECOMPT, MORRIS A
100 SECOND AVENUE SOUTH
SUITE 1201
ST. PETERSBURG FL 33701

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

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	D	DELETE
NAME	MANZIONE, MICHAEL J	
STREET ADDRESS	2620 BUTTWOOD AVE.	
CITY-ST-ZIP	MIRAMAR FL 33025	
TITLE	D	DELETE
NAME	ROHRER, DEREK S	
STREET ADDRESS	5200 SEMINOLE BLVD. SUITE H	
CITY-ST-ZIP	ST. PETERSBURG FL 33708	
TITLE	D	DELETE
NAME	CARR, TERRY	
STREET ADDRESS	5200 SEMINOLE BLVD. SUITE H	
CITY-ST-ZIP	ST. PETERSBURG FL 33708	
TITLE	D	DELETE
NAME	BACH, WALTER D JR	
STREET ADDRESS	68 KIMBERLY DRIVE	
CITY-ST-ZIP	DURHAM NC	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PRESIDENT	Change	Addition
1.2 NAME	MANZIONE, MICHAEL J.		
1.3 STREET ADDRESS	145 Citrus Park Circle		
1.4 CITY-ST-ZIP	Boynton Beach, FL 33436		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE	D	Change	Addition
3.2 NAME	CARR, TERRY		
3.3 STREET ADDRESS	13085 96th Avenue North		
3.4 CITY-ST-ZIP	Seminole, FL 34646		
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
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: Michael J. Manzione Michael J. Manzione 4-16-97 561-733-9753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)