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FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000070910 (1)

1. Corporation Name

WHISTLER 314, INC.

Principal Place of Business

20157 NE 16 PL
NO MIAMI BEACH FL 33179

Mailing Address

19707 NE 36TH CT
PHF
AVENTURA FL 33180
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1995

4. FEI Number

65-0625357

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 19707 NE 36 CT

Suite, Apt. #, etc.

22 PHF

City & State

23 AVENTURA FL

Zip

24 33180

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

M & W AGENTS INC
9100 S DADELAND BLVD PH-I
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name JOANNE BESNER

82 Street Address (P.O. Box Number is Not Acceptable)

19707 NE 36 CT - PHF

83

84 City AVENTURA

FL

85 Zip Code 33180

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

Joanne Besner

(NOTE: Registered Agent signature required when reinstating)

4-20-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
BESNER, STANLEY
STREET ADDRESS 19707 NE 36TH CT PHF
CITY-ST-ZIP AVENTURA FL

TITLE ☐ DELETE

NAME STD
BESNER, JOANNE
STREET ADDRESS 19707 NE 36TH CT PHF
CITY-ST-ZIP AVENTURA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 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: JOANNE BESNER JOANNE BESNER 4-20-98 305-932-5001

CR2E034 (10/97)