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PROFIT CORPORATION ANNUAL REPORT

1997



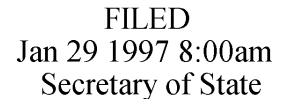
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000078547** (3)

MAGGIE WELLS INC.





Principal Place of Business	Mailing Address			(11 III
1880 N.W. 122 TERRACE PEMBROKE PINES 33 33026 US	1880 N.W. 122 TERR/ PEMBROKE PINES 33 US				
•	33	· ·	3. Date Incorporated or Qualified 10/06/1995	3a. Date of Last Re 08/05/1996	port
2. Principal Place of Business	dan St. 26 5/19 Sc	10) 121 ST AUR.	4. FEI Number 65-061 48 APPLIED FOR	•	plied For
21 /3/03 2/16/11 Suite, Apt #, etc.	Suite, Apt. #, etc		AFFLIED FOR	□ \$8.75 A	Applicable
22	27	•	5. Certificate of Status Desired	Fee Rec	
City & State Cooper City,	, FL City & State 28 Ft. Calu	derdale, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 i	•
14 33026 25 E	Broward 29 Zip 3 33 2	30 Broward		Yes 🔀 No	199.032,
9, Name and Ad	ddress of Current Registered Agent	81 Name J	10. Name and Address of New Regis		
1880 N.W. 122 TERR.	A 1	wess 77	looper, Margaret	œ.	
PEMBROKE PINES FL	. 33028 - only	82 Street Add	ress (P.O. Box Number is Not Agceptable)	<u>e</u>	
		84 City	·La uderedalo	85 Zip C	
 office or registered agent, or l 	both, in the State of Florida, Such change	was authorized by the corporal	poration submits this statement for the pur- tion's board of directors. I hereby accept t	pose of changing its	330 registered registered
SIGNATURE	accept the obligations of Section 607.050	(NOTE: Registered Agent signature requi			·
Signal ire, typed or printed	f name of registered agent and tick if applicable OFFICERS AND DIRECTORS	(NOTE: Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICER	DATE RS AND DIRECTORS	S IN 12
THLE PSTD	DELET		ice President/secs	Change	
NAME HOOPER, MARG		1.2 NAME	topped Margaret W	TO RECEOR	-
STREET ADDRESS 1880 N.W. 122		1.3 STREET ADDRESS	5119 6.4.101	11 170C	λ
CITY-SI-ZIP PEMBROKE PIN		1.4 CiTY-ST-ZIP	Ft; Louvergale,	CL 3333	
THILE	DELET	1	esident The	72 □ Change Wer	Addition
NAME		2.2 NAME	2165 Sheritan St.		
STREET ADDRESS		2.3 STREET ADDRESS	200 per City FL 33	3026	
TITLE	DELET	2 4 City-St-ZiP	reasurer	☐ Change	Addition
NAME		20000	Kelth G. Kramer	_	
STREET ACHDRESS		3.3 STREET ADDRESS	2165 Speridan ST	•	
CITY-SI-ZIP		34. CITY-ST-ZIP	Loopen City, FL 330	26	
TITLE	☐ DELET		***************************************	☐ Change	Addition
NAME		4 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY+S1-ZIP		4.4 City-St-Zip			
THLE	DELET	E 51 TITLE		Change	Addition
NAME		52 NAME			
STREET ADDRESS		53 STREET ADDRESS			
CITY-ST-ZIP	L progra	5.4 CITY-ST-ZIP		T Observe	Aganda -
·TITLE	L DELET	1		∐ Change	
NAME		62 NAME			
. STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIF	formation supplied with this films does not	64 City-St-ZiP	d in Section 119.07(3)(i), Florida Statutes.	I further cortify that t	the
information indicated on this a Lam an officer or director of t	annual report or supplemental annual repo	ort is true and accurate and that	at my signature shall have the same legal e	affect as if made und	der oath: that
SIGNATURE:	ATURE AND TYPED OR PRINTED SAME OF SIGNING O	WXDOGEL FREETOR 11	Vice President 1/16/97	433-98 Daysme Prione #	214
	marcant	FFICER OR DIRECTOR	· TARRI CANCE	A1864	