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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000081499 (2)

WEDD & WILLOW INC

## **FILED** Feb 16 1998 8:00am Secretary of State

AACOD	OF MAIT 2011' IUC'						
Principal Plac	e of Business	M	ailing Address				
11420 NORTHWEST 31ST PLACE 11420 NORTHWEST SUNRISE FL 33323 SUNRISE FL 33323				ST PLACE			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 10/24/1995
2. Principal Place of Business 21			a. Mailing Address				4. FEI Number Applied For 65-0616728 Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired See Regulred
22 City & State			7 City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country		trv 28	Zip Country			Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible	
24	25	29	·	30			Personal Property Tax due June 30.  Yes No
		ess of Current Regis	itered Agent			<del>_</del>	10. Name and Address of New Registered Agent
	E LAW OFFICE OF				81	Name	
1545 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33334					B2	Street Ad	dress (P.O. Box Number is Not Acceptable)
					83		<del></del>
					84	City	FL 85 Zip Code
11. Pursuant to the provisions of Soctions 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   Signature, typed or periled name of registered agent and ticle if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.		OFFICERS AND DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD		☐ DELETE	1.1 TI	TLE		☐ Change ☐ Addition
NAME	MULLER, DAVID			1.2 N/	ME		İ
STREET ADDRESS 11420 NORTHWEST 31ST PL			E 1.35		REET	ADDRESS	
CITY-ST-ZIP	SUNRISE FL 333	23		1.4 CI	1Y-5	T-ZIP	
TITLE			☐ DELETE	2.1 TI	ILE	-	Change
NAME				2.2 N	ME		
STREET ADDRESS						ADDRESS	· · · · · · · · · · · · · · · · · · ·
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NAME				4.2 N			E Oneigo E Munitor
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NAME				5.2 N/		)	· —
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CITY-ST-ZIP				5.4 CI			
TITLE	4		DELETE	6.1 TF			☐ Change ☐ Addition
NAME	•			6.2 NA	ME		
STREET ADDRESS				6 3 ST	REET	ADDRESS	
CITY-ST-ZIP				6.4 00	Y-S1	r- <b>Z</b> IP	

14. I hereby certify that indicated on this and officer or director of it with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tal 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 an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in