## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION \* ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE. Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000084972 (5)					_		
1. Corporation	Name	0004072 (0	<b>'</b> '				
WIRIN	IG ASSOCIATES, INC.				I 1889/660 SIN INITA BIJIK 68UH 8	Alto Adolf Adidi kanna sasas at	 
Principal Place of Business		Mailing Address	Mailing Address				
1937 WEST 76TH STREET HIALEAH FL 33014		1937 WEST 76TH STREET HIALEAH FL 33014					
					3. Date Incorporated or Qualified 11/03/1995	3a. Date of Last Re	port
Principal Place of Business     1		2a. Mailing Address		4. FEI Number	-/\/2  4   <i>/</i> _	Applied For Not Applicable	
Suite, Apt. #	#, etc	Suite, Apt. #, etc.			10 100- 100-		Additional
22		27		5. Certificate of Status Desired		Required	
City & State		Orty & State		6. Election Campaign Financing	\$5.0 <del>/</del>	May Be	
23	28		y		Trust Fund Contribution ***		to Fees
Z <sub>I</sub> p			Country		8. This corporation has liability for Florida Statutes	intangible tax under s s No	199.032,
24	25 9. Name and Address of Current	29 Registered Agent	] <b>3</b> 0]		10. Name and Address of New I		
		ttog.otoroo rigott	81	Name	10	iogistorea rigeri	
ROSE.	EDWIN G		82	0, , , ) 4 - 1	ress (P.O. Box Number is Not Accepta	his)	
1937 WEST 76TH STREET			62	Street Addi	ress (F.O. Box Number is Not Accepta	.rej	
HIALEAH FL 33014			83				
			84	City		<b>—. 85</b> Z <sub>I</sub>	Code
11. Pursuant to or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid	and 607.1508, Florida Statutes i.e. Such chacce was authorize	s, the above-n	anted corpor exation's boa	ration submits this statement for the purid of directors. Thereby accept the app	irpose of changing its ri pointment as registered	egistered office agent Tam
familiar with	h, and accept the obligations of, Section	on 607.0506, Florida Statutos	,			a man or og	ogont / tim
SIGNATURE	Shiriatare, types for printed name of exject rest a part.				Note that the second second	DATE	
12.	OFFICERS AND DIRECTORS		Tel En general Agent signature required  13.		ADDITIONS/CHANGES TO OF		RS IN 12
TITLE	D	DELETE	I 1 DILE		7,227101107017411020170	Change	Addition
NAME	rose, Edwin G		1.2 NAME				
STREET ADDRESS	rss 1937 WEST 76TH STREET		1.3 STREET	ADDRESS			
CITY - ST - ZIP	HIALEAH FL 33014		14 CHY ST-ZiP				
THILE	D	□ DELETE	2 1 TilliE			☐ Change	Addition
NAME	MANALIO, KEITH		2 2 NAMF				
STREET ADDRESS	1937 WEST 76TH STREET		2.3 STREET ADDRESS				
C(1Y - \$1 - 2(P	HIALEAH FL 33014		2.4 CHY+S1+ZIP				
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NAME STREET ADDRESS	FERNANDEZ, LAZARO 1937 WEST 76TH STREET						
CITY - ST - ZIP	LHALFALL FL DOGA		3.4 CHY - S	i			
THLE	7111 LL 377 L 3331	DELETE	4 1 TUTLE	1.21		Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-SI-ZIP			4.4 Ci1Y - \$				
TITLE			5 1 Till E		ے میں بیسے بیسے بیسے مسیو	Change	Addition
NAME			5.2 NAME		5000018	60352	
STREET ADDRESS			5 3 STREET	ADDRESS	-06/12/9601	.111009	
CITY-ST-ZIP	makan na sasa asasa sasa na sana sa		5 4 CiTy - S	I - <b>Z</b> IP	***200.00	<u></u>	
TITLE		DELETE	6 1 TI'LE			☐ Change	Additigrir
NAME			6.2 NAME				5/
STREET ADDRESS			63 STHEFT				// 12
CITY-ST-7IP	i		6.4 CITY - S	1.712 I			

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 copywindtori or the receiver or trusted 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:

\*\*Total Part of the exemption stated in Section 119 07(3)(k), Florida Statutes, I further certify that I am a officer or trusted 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\*\*\*

\*\*Total Part of the exemption stated in Section 119 07(3)(k), Florida Statutes, I further certified and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes, I further certified and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes, I further certified and course and that my signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made under on the signature shall have the same legal effect as if made unde

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