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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 06 1997 8:00am

Secretary of State

2-20-97 305-254-6324 Dayline Proces

Sandra B. Mosthage

Secretary of State

DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # P95000086316 (3)

WING-IT CONCEPTS, INC.

Principal Place of Business Mailing Address					I FORDIFORE FARE HOLD I DITHE BOTH REPAY AND I	I BUIDE FOIRD OFFOR HERE HIDING BUIL EDAL
		14896 SOUTHWEST 132N MIAMI FL 33188-7615	14896 SOUTHWEST 132ND AVENUE MIAMI FL 33186-7615			
					3. Date Incorporated or Qualified 11/09/1995	3a. Date of Last Report 05/01/1996
	ace of Bus-ness	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0632682	Not Applicable
Suite, Apt.:		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	T		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for in	gtangible tax under s. 199.032, Yes No
24	9. Name and Address of Curr	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New Re	
THE	LAW FIRM OF LAWRENCE J		8	1 Name	(10 (11 1- 1	
	ALMERIA AVENUE	OFICALL OHIND			Genn Stolzen	oecz
CORAL GABLES FL 33134			6:	2 Street Add	dress (P. S. Box Number is Not Acceptab	20-
001	ME CADEED IE CO IOT		8	3	4	
					<u> </u>	
	4		8	4 City	MANE	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections (07.0	502 and 607.1508, Florida Statut	es, the abo	ve-named cor	rporation submits this statement for the p	urpose of changing its registered
11. Pursuant to the provisions of Scotions (07,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. In both purpose of changing its registered agent I am familiar with a data gift the obligations of. Section 607,0505, Florida Statutes.						
111/1/11						
SIGNATURE	Signature: typy d our inted care of egistimed i	agent and title if applicable (NOT	E: Registered A	gent signature requ	uired when reinstating)	DATE
12.		ND DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE			Change Addition
NAME	STOLZENBERG, GLENN S		1.2 NAMI			
STREET ADDRESS	14896 SOUTHWEST 132ND	AVENUE	1.3 STRE	ET ADDRESS		
CITY-S1-20F	MIAMI FL 33186		1.4 CITY	-ST-ZIP		
TITLE	VSD	☐ DELETE	21 TITLE			Change Addition
NAME	DECKER, RICK W		22 NAM			
STREET ADDRESS	14896 SOUTHWEST 132ND	AVENUE	23 STAE	et address		
City ST-ZiP	MIAMI FL 33186	T pereze	2.4 CITY			
TillE		☐ DELETE	3 1 TITLE	· i		Change Addition
NAME			3.2 NAM	1		
STREET ADDRESS				et address		
CITY-\$1-7IP		☐ DELETE	3.4. City			Change Addition
1)TLF			4 1 TITLE			L. J. OHRINGE L. J. MUUIIIOII
NAME CLUCST ADODECC			4 2 NAM	ET ADDRESS		
STREET ADDRESS						
CITY - ST - 7:P TITLE		☐ DELETE	4.4 CITY 5.1 TITLE			Change Addition
NAME		C PERCE	5.2 NAM	i		En orange En requion
STREET ADDRESS				ET ADDRESS		İ
CITY-ST-ZIP			5.4 CITY			
Tifut	ALSO TELEVISIONE OF LANGE AND THE PROPERTY ASSESSMENT	DELETE	6 1 TITLE			Change Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
14. Ldo heret	by certify that the information supp	lied with this filing does not qual	fy for the ex	remotion state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatio Lam an ol appoars ii	n indicated on this annual report of Higer or director of the corporation o Block 12 or Block 13 if cliange I,	r supplemental annual report is l orline fed iver or trustee empoy , or or with an ad-	rue and act vered to exi dress	curate and the ecute this rep	at my signature shall have the same lega ort as required by Chapter 607, Florida S	i effect as if made under oath; that tatutes; and that my name
appears in those it on block to it offenger, or other had sill an address.						

TED NAME OF SIGNING OFFICER OR DIRECTOR