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 # P95000087860 (9)

WEDGEWOOD PROPERTIES FL, INC.

FILED Jan 28 1998 8:00am Secretary of State



City & State	Principal Place of Business Mailing Address						•	F FOOTIOUT CLU FORME DITHE OBITE OUT OBJET OUT OF STATE OUT			
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22 Suite, Apt. #, etc. Suite, Apt. #, etc.	2 Principal P	lace of Rusiness	29	Mailing Address							natiod For
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27											
City & State	22			 			5. Certificate of Status Desired				
28							6. Election Campaign Financine	3	\$5.00	May Be	
Zip	23			28							
9. Name and Address of Current Registered Agent MARK S. KROHN 1049 NW 3RD ST. HALLANDALE FL 33009 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis 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, are floring a submits with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title Fapplicable. PSD DELETE 1.1 TITLE Change Addition MAKE ALLANDALE FL 33009 1.4 City-51-Zip TITLE DELETE 31 TITLE Change Addition MAKE 1.2 NAME 2.2 NAME MAKE 1.3 STREET ADDRESS 1.3 STREET ADDRESS MAKE 1.4 NAME 2.3 STREET ADDRESS MAKE 2.3 NAME 3.3 STREET ADDRESS MAKE MAK		Country		Zip Cou		untry		8. This corporation owes or has	paid the cu	irrent year In	tángiblé
MARK S. KROHN 1049 NW 3RD ST. HALLANDALE FL 33009 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 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 agent, are in familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSD KROHN, MARK 1049 NORTHWEST 3RD STREET 11. TITLE PSD KROHN, MARK 1049 NORTHWEST 3RD STREET 11. TITLE 12. AMME 14. CITY-ST-ZIP 14. CITY-ST-ZIP 15. TITLE 10. DELETE 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 22. NAME 23. STREET ADDRESS CITY-ST-ZIP 14. CITY-ST-ZIP 15. TITLE 15. TITLE 16. DELETE 17. ST-ZIP 18. DELETE 17. ST-ZIP 18. DELETE 18. STREET ADDRESS CITY-ST-ZIP 18. DELETE 18. STREET ADDRESS CITY-ST-ZIP 18. DELETE 19. STREET ADDRESS CITY-ST-ZIP 19. DELETE 19. STREET ADDRESS CITY-ST-ZIP 10. DELETE 11. TITLE 10. DELETE 13. TITLE 14. CITY-ST-ZIP 15. STREET ADDRESS CITY-ST-ZIP 17. ST-ZIP 17. ST-	24	25		30							No
MATRY S. ARUTIN 1049 NW 3FD ST. HALLANDALE FL 33009 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the corporation submits this statement for the purpose of changing its 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, and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in the state of Florida, Statutes. SIGNATURE Signature, typed or printed name of registered agent and title # applicable. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSD		Name and Addr	ess of Current Regi				10. Name and Address of New Registered Agent				
HALLANDALE FL 33009 83	I MA	ark S. Krohn	•			81	Name				
HALLANDALE FL 33009 B3	10-	49 NW 3RD ST.	•		ł	82	Street Add	dress (P.O. Box Number is Not Acces	otable)		
### 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. ### SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renatating) DATE	HA	LLANDALE FL 3300	9		1						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature	1				[83					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the purpose of changing its registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	}					0.1	City	- · · · · · · · · · · · · · · · · · · ·		oe Zin	Cada
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent Signature required when reinstating)							- ,			_ '	
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent Signature required when reinstating)	11. Pursuant	to the provisions of Sec	tions 607.0502 and 6	607.1508, Florida Statu	tes, the ab	ove	-named cor	poration submits this statement for the	ne purpose o	of changing i	ts registered
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent Signature required when reinstating)	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.										
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4. 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 or block 13 or on an attachment with an address.

SIGNATURE May No KINDE REQUIRED

1/21/98

954-456 6066