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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000027195 (2)

WENDIUM OF FLORIDA, INC.

## **FILED** Jan 27 1997 8:00am Secretary of State

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Principal Place	of Business	Mailing Address		f indiendt iin idian driit batel bein dati	i Boile jikil jaani liaja jalul alii laai	
12125 SW 46TH STREET MIAMI FL 33175		12125 SW 46TH STREET MIAMI FL 33175-4733				
				3. Date Incorporated or Qualified 03/27/1996	3a. Date of Last Report	
2. Principal Pla 21 6898 Suite, Apt. #	s.w. 40 st.	28. Mailing Address 26. 12125 5.W. Suite, Apt. #, etc.	46 St.		Applied For Not Applicable \$8.75 Additional	
22	-	27		5. Certificate of Status Desired	Fee Required	
City & State  23 MiQV	ni,Fl.	City & State  28 Miami, F	Ξ	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3315	55 25 USA	29 33175 30 3	USA	This corporation has liability for i     Florida Statutes	ntangible tax under s. 199.032, Yes No	
17 JJ -	9. Name and Address of Current		7 27	10. Name and Address of New Re-		
DOM	INGUEZ, RAUL		81 Name			
12125 SW 46TH STREET MIAMI FL 33175			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
ITIKAN	ii ( L 001/0		83			
			84 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 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.						
DIGINATURY:	ignature typort or triuted name of rog 9 secil agent					
12.	gnature typed or preded name of region call agend OFFICERS AND		stered Agent signature req	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	
TITLE	D		.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition	
NAME	DOMINGUEZ, RAUL		2 NAME			
STREET ADORESS	C/O 12125 SW 46TH ST		3 STREET ADDRESS			
CITY-ST-ZIF	MIAMI FL 33175		.4 CITY - ST - ZIP			
TOTLE	D		1 TITLE		Change Addition	
NAME	DOMINGUEZ, GEORGINA M	·	2 NAME			
STREET ADDRESS	C/O 12125 SW 46TH ST	1	3 STREET ADDRESS			
City-S1-20F	MIAMI FL 33175		4 CITY-ST-ZIP			
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TITLE		1 60 676	4 CITY - ST - ZIP		Change Addition	
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NAME STREET ADDRESS			2 NAME			
STREET ADDRESS 1		<b>.</b>	A CLEEK LANDOLCC			

14. Too 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

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lominguez 1-6-97