## 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 # P96000034901 (4)

JOHN WILDER ENTERPRISES, INC.

## FILED May 20 1998 8:00am Secretary of State

SOME WEDER ENTERN MODES, MO.						
Principal Place of Business Mailing Address					—              1	8488 11111 31848 38411 EDIBE HEL IJEL
'		-	-			
8444 SW 103RD AVE   8444 SW 103RD AVE   MIAMI FL 33173   MIAMI FL 33173   MIAMI FL 33173					·	
William 15 55115					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	
9 Principal D	ace of Business	2a. Mailing Address	·····	<del> </del>	04/18/1996 4. FEI Number	Analised For
<b>—</b>	IdON OF DUSINESS	<u>├</u>	ו			Applied For Not Applicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0703777	CO 75 A 4 (1)	
22		<del></del>	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution		
<b>Z</b> ip	Country Zip Country		У	8. This corporation owes or has paid to	he current year Intangible	
24	25 29 30				Personal Property Tax due June 30.	
	9. Name and Address of Curre	nt Registered Agent	81	1 11	10. Name and Address of New Regist	tered Agent
NEUSTEIN, CHARLES L				I Name		
420 LINCOLN RD SUITE 600			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
MV	AMI BEACH FL 33139		83			····
			0.	<b>'</b>		
			84	1 City		FL 85 Zip Code
11. Pureupot t	to the provisions of Sections 607.05	02 and 607 1508. Florida Stati	utos the abou	ve-parned corn	poration submits this statement for the purp	<del></del> -
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or posted name of registered agent and title if applicable (NOTE Registered Agent signature					red when reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	D DELFTE		1.1 TITLE			Change Addition
NAME			1.2 NAME			
STREET ADDRESS 8444 SW 103RD AVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33173		1.4 CITY -			
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS				T ADDRESS	•	,
CITY-ST-ZIP		DELETE	2. 4 CITY - 3.1 TITLE			Change Addition
TITLE NAME	DELEN		3.1 IIILE 3.2 NAME			The cuanting the supplicit
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE	DELETE		4.1 TITLE		•	Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS	RESS 5.3		5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE	DELETÉ		6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-			
14. I hereby o	certify that the information supplied v	vith this filing does not qualify	for the exemp	ption stated in	Section 119.07(3)(i), Florida Statutes. I furt	her certify that the information

indicated on this annual report or supplienced annual report is true and accurate and that my signature shall have the same legal effect as if made under coath; 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 if changed, or on an attachment with an address.

CIGNIATUDE:

20/9