

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED

Jun 19, 2000 8:00 am
Secretary of State

05-19-2000 90026 041 ***150.00

DOCUMENT # P96000038370

1. Entity Name

PROPERTIES - WAG, INC.

Principal Place of Business

18425 N.W. 2ND AVENUE
SUITE 355
MIAMI FL 33169

Mailing Address

18425 N.W. 2ND AVENUE
SUITE 355
MIAMI FL 33169-4525

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

3242 S.W. 51ST St.

Suite, Apt. #, etc.

H. Land. Fla

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0671931

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, WILMA Pres
18425 N.W. 2ND AVENUE
SUITE 355
MIAMI FL 33169

PROPERTIES WAG INC.
3242 S.W. 51ST St.
H. Land. Fla. 33312

Name Wilma Smith Pres.
Street Address (P.O. Box Number is Not Acceptable)
3242 S.W. 51ST St.
H. Land. Fla.
City FL Zip Code 33312

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Wilma D. Smith Wilma Smith 6/12/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☐ Delete
NAME	SMITH, WILMA	
STREET ADDRESS	18425 N.W. 2ND AVE. SUITE 355	
CITY - ST - ZIP	MIAMI FL 33162	
TITLE	D	☒ Delete
NAME	SPECTOR, ALAN	
STREET ADDRESS	18425 N.W. 2ND AVE. SUITE 355	
CITY - ST - ZIP	MIAMI FL 33162	
TITLE	D	☒ Delete
NAME	CRANE, GEORGE	
STREET ADDRESS	18425 N.W. 2ND AVE. SUITE 355	
CITY - ST - ZIP	MIAMI FL 33162	
TITLE	:	☐ Delete
NAME	:	
STREET ADDRESS	:	
CITY - ST - ZIP	:	
TITLE	:	☐ Delete
NAME	:	
STREET ADDRESS	:	
CITY - ST - ZIP	:	
TITLE	:	☐ Delete
NAME	:	
STREET ADDRESS	:	
CITY - ST - ZIP	:	

TITLE	Wilma Smith	☐ Change ☐ Addition
NAME	3242 S.W. 51 ST St.	
STREET ADDRESS	H. Land. Fla. 33312	
CITY - ST - ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	James + Carol Davis	
STREET ADDRESS	3372 SW 51st St.	
CITY - ST - ZIP	Fort. Lauderdale, FL 33312	
TITLE	D	☐ Change ☒ Addition
NAME	Marlene Schneider	
STREET ADDRESS	1456 Chestnut Lane	
CITY - ST - ZIP	Rochester Hills, MI 48309	
TITLE	:	☐ Change ☐ Addition
NAME	:	
STREET ADDRESS	:	
CITY - ST - ZIP	:	
TITLE	:	☐ Change ☐ Addition
NAME	:	
STREET ADDRESS	:	
CITY - ST - ZIP	:	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wilma D. Smith 4/30/00 954 962-5905
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2034 (9/99)