2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with a

SIGNATURE:

FILED Feb 25, 2004 08:00 AM Secretary of State DOCUMENT # P96000838370 1. Entity Name PROPERTIES - WAG, INC. Principal Place of Business Mailing Address 3242 SW 51ST ST 3242 SW 51ST STREET FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0671931 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, WILMA Street Address (P.O. Box Number is Not Acceptable) 3242 SW 51ST STREET FORT LAUDERDALE FL 33312 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TIRLE ☐ Delete BDF ☐ Change ☐ Addition SMITH, JACK L NAME NAME U00000064899 STREET ADDRESS 3242 SW 51ST STREET STREET ADDRESS 02/25/04-80013-025 150.00 CITY - ST- ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME DAVIS, JAMES & CAROL NAME 3372 SW 51ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME SCHNEIDNER JOHN, MARLENE NAME STREET ADDRESS STREET ADDRESS 1456 CHESTNUT LANE CITY-ST-ZIP CITY-ST-ZIP ROCHESTER MI 48309 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME SMITH, WILMA D 3242 SW 51ST ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-7iP CITY+ST-7IP Delete TITLE Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 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 10 or Block 11 if