

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000052244 (6).

1. Corporation Name
WILD CARD, INC.

Principal Place of Business
1215 EAST BROWARD BOULEVARD
FORT LAUDERDALE FL 33301

Mailing Address
1215 EAST BROWARD BOULEVARD
FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/19/1996

4. FEI Number
65-0685959

Applied For
Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 4400 PETERS Rd

Suite, Apt. #, etc.

22

City & State
23 PLANTATION FL

Zip
24 33317

Country
25 BROWARD

2a. Mailing Address

26 Rusty NAIL Lodge

Suite, Apt. #, etc.

27 4400 PETERS Rd

City & State
28 PLANTATION FL

Zip
29 33317

Country
30 BROWARD

9. Name and Address of Current Registered Agent

GILDON, MICHAEL
850 ARGONAUT ISLE
DANIA FL 33004

10. Name and Address of New Registered Agent

81 Name MICHAEL L. GILDON
82 Street Address (P.O. Box Number is Not Acceptable)
850 ARGONAUT ISLE
83
84 City DANIA FL 85 Zip Code 33004

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.

SIGNATURE Michael L. Gildon

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-28-98

12. OFFICERS AND DIRECTORS

TITLE P
NAME GILDON, MICHAEL
STREET ADDRESS 850 ARGONAUT ISLE
CITY-ST-ZIP DANIA FL ☐ DELETE

TITLE S
NAME WILLIAM, FRED
STREET ADDRESS 4400 PETERS LANE
CITY-ST-ZIP FT LAUDERDALE FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 if changed, or on an attachment with an address.

SIGNATURE: Michael L. Gildon

7-28-98 954-581-9523

CR2E034 (5/98)

RUSTY NAIL LOUNGE
4400 PETERS RD.
PLANTATION, FL. 33317

JULY 28, 1998

FLA. DEPT OF STATE
P.O. BOX 6327
TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT TO MATTERS WE
COULD NOT CONTROL WE NEVER RECEIVED THE
ORIGINAL PAPERS TO ENABLE US TO FILE ON TIME.

WE WOULD APPRECIATE ANY CONSIDERATION ON MAKING
US PAY A LATE FILING FEE.

OUR CHECK FOR \$50⁰⁰ IS ENCLOSED.

Very Truly Yours,

Michael L. Hilda