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 #

P96000052887 (2)

FILED May 21 1998 8:00am Secretary of State

WARDF	ROBE, INC.	`,			
Principal Place	e of Business	Mailing Address		I SERIEBUI (IB IBIID BIEII BBIII BBIES DURAI USEDI I) B
84 UNO LAGO DRIVE JUNO BEACH FL 33408		84 UNO LAGO DRIVE JUNO BEACH FL 33408		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal P	ace of Business	2a. Mailing Address	· 	06/19/1996 4. FEI Number	Applied For
21		26		65-0680823	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29 3	-a '	8. This corporation owes or has paid the of Personal Property Tax due June 30.	urrent year Intangible
24	9. Name and Address of Currer		<u> </u>	10. Name and Address of New Registere	
CHELLY, FREDERICK C 81 Name 1				FOON 0:0 5 0	LYEIT
1420 OCEAN DRIVE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	Cheuy
APARTMENT 2A			996	TEFERSON A	\'
MIAMI BEACH FL 33139			83	, y	- .
			84 City	IAM BEACH.	85 Zip Code
			11, 1	FI 9 F	L 환경(공역
11. Pursuant 1	to the provisions of Sections 607.050	poration submits this statement for the purpose	of changing its registered		
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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Supplied professional college to the professional supplied to the professional supplied when the professional supplied to					7-27.70
		in anothic if applicable (NOTE F D DIRECTORS	tog tered Agent signature requ	· · · · · · · · · · · · · · · · · · ·	UD DIDECTORO IN 10
12, TITLE	DI FIGH HS AN	DELETE	1 S TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	CHELLY, JACQUELINE M	F. Achteria	12 NAME		
STREET ADDRESS	84 UNO LAGO DRIVE		1.3 STREET ADDRESS		1
CITY-ST-ZIP	JUNO BEACH FL	i	1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS		!	2 3 STREET ADDRESS		
CITY-ST-ZIP	·		2. 4 CiTY-ST-ZiP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Decemen	3.4. CITY - ST - ZIP		
TITLE		L DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	2000025325: -05/22/98010070	32
STREET ADDRESS			4.3 STREET ADDRESS	-05/22/98010070	4 0
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	*** i 50.00	Change Addition
NAME		hand Observe	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		201
CITY-ST-ZIP			5.4 CITY - ST - ZIP		5/01
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied w	ith this filing does not qualify for t	he exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

4. Thereby 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 suppliemental 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 on the receiver or trustee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attactment with an address.

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