FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000059641

1. Corporation Name

WIBOH	G PHOPERITES COMPANY	, INC.		1 (111 (1 48) (30)83(0 0)(3 04(0) 00(0) 00(0)	I BIBLI BILLA LALLA BILLA BIBLI BIBLI BIBLI BABL
Principal Pla	ice of Business	Mailing Address			IBBBI BRITA TATAR ATTA BIGAR ITAT 1801
600 WEST 83RD STREET 600 WEST 83RD STREET					
HIALEAH FL 33014 HIALEAH FL 33014					
				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualifed 07/16/1996	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Anation For
21 26			65-0685906	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
27			5. Certifcate of Status Desired	Fee Required	
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23 28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	r Intangible
24	25	29	30	Personal Property Tax.	Xi Yes □ No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Register	red Agent
BLO	OCH, STUART E ESQ.		o i Name		,
2600 N. MILITARY TRAIL FOURTH FLOOR			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83	· January of the state of the s	e y mayon ya ya a war
BO	CA RATON FL 33431				网络拉拉斯斯斯 亚斯士
			84 City	.	85 Zip Code
11. Pursuan	t to the provisions of Sections 607.05	502 and 607.1508, Florida Statut	es, the above-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	e of changing its registered
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized by the corporation	on's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE	_	,			
	Signature, typed or printed name of registered ag		: Registered Agent signature require		
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	WIBORG, ERIC J	☐ DELETE	1.1 TITLE	14 19 19 19 19 19 19 19 19 19 19 19 19 19	☐ Change ☐ Addition
NAME	COO MICOT CODD OTDERT		1.2 NAME		•
STREET ADDRESS	HIALEAH FL 33014		1.3 STREET ADDRESS		
CITY-ST-ZIP	THALEATTE GOOTY	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		□ change □ Addition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	A SPLEAN.	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY- ST- ZIP		
TITLE		☐ OELETE	4.1 TITLE	1.36	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			5.3 STREET ADDRESS		
CITY-ST-ZIP	I				
TITLE			5.4 CITY-ST-ZIP		
		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME		☐ DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Feb 13, 1999 8:00am

Secretary of State

02-13-1999 90009 005 ***150.00

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