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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000077664 (6)

FILED May 02 1997 8:00am Secretary of State

WEKARE READERS & INTERPRETERS, INC. Principal Place of Business Mailing Address 3000 HOLIDAY DR #1006 FT LAUDERDALE FL 33316 ST. LAUDERDALE FL 33316									
						3. Date Incorporated or Qual 09/16/1996	ified 3a.	Date of Last P	Report
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number		I TAI	pplied For
21		26				65.072	2 46		ot Applicable
Suite, Api	t #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desire			Additional
22		27			·	Of Collineate of States Desire			equired
City & Sta	ate	City & State				6. Election Campaign Finance			May Be
23] Zip	Country	28 Z _I p	Cou	untry	 	Trust Fund Contribution			to Fees
24	25	29	30	ariti y		This corporation has liabili Florida Statutes	ty for intangit Yes	e tax under s	s. 199.032,
.71	9. Name and Address of Curre		1001]	··· · · · · · · · · · · · · · · · · ·	10. Name and Address of No			
GL	ADSTONE, GERALD J			81	Name		······································	-	
	00 HOLIDAY DR #1006			82	Street Addr	ess (P.O. Box Number is Not Acc	entable)		
FT	LAUDERDALE FL 33316				Oli GOL AGGI	BSS (F.O. DOX PROFILED IS NOT HOL	,epidole/		
				83					
				84	City	· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
					•		F		
anont 1	am familiar with land account the ablic	sations of Section 607 0505	s autnorize Florida Stat	d by th	he corporat	ion's board of directors, I hereby	accept trie at	ppolitition as	
SIGNATURE	Signature, typical or printed time of registered ag	ont and little if applicable. (N	OTE: Registere			poration submits this statement for ion's board of directors. I hereby ed when relietating)	7-25 DATE	5-57	
SIGNATURE	Signature, typical or printed time of registered ag	ient and little if applicable. (No. 10 DIRECTORS	OTE Registere	od Agent			7-25 DATE	5-57 ND DIRECTOR	RS IN 12
SIGNATURE	Signature, typed or printed from of registered as OFFICERS AN	ont and little if applicable. (N	OTE: Registere	od Agent		ed when reinstating)	7-25 DATE	5-57	
SIGNATURE 12.	Signature, typed or printed from of registered as OFFICERS AN D GLADSTONE, GERALD J	ient and little if applicable. (No. 10 DIRECTORS	OTE Rogistero 13. 1.1 TI	od Agent	signature require	ed when reinstating)	7-25 DATE	5-57 ND DIRECTOR	RS IN 12
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SIGNATURE 12. TITLE NAME SIREET ADDRESS	Signative, type of the principal principal registered as OFFICERS AN D GLADSTONE, GERALD J 3000 HOLIDAY DR #1006	ient and little if applicable. (No. 10 DIRECTORS	OTÉ Rogistero 13. 1.1 T/ 1.2 N/ 1.3 S1	od Agent ITLE IAME TREET AD	signature require	ed when reinstating)	7-25 DATE	5-57 ND DIRECTOR	RS IN 12
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SIGNATURE 12. THE NAME SIREET ADDRESS CHY-SI-ZIP THE	Signature, typed or present your of registered as OFFICERS AN D GLADSTONE, GERALD J 3000 HOLIDAY DR #1006 FT LAUDERDALE FL 33316	iont and life if applicable. (NIND DIRECTORS DELETE	OTE: Registere 13. 1.1 Tr 1.2 Nr 1.3 ST 1.4 Cr 2.1 Tr 2.2 Nr	od Agent ITLE IAME ITREET AD ITLE	signature require	ed when reinstating)	7-25 DATE	ND DIRECTOR Change	RS IN 12
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. For hereby certify that the information supplied with this filing does not quality 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 arm 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

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

425.57 554.524.9029

0275379