FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P96000095213 (0)

W & L TAYLOR CORPORATION

Principal Place of Business Mading Address 13575 WEST DIXIE HIGHWAY 13575 WEST DIXIE HIGHWAY MIAMI FL 33161 MIAMI FL 33161-3827 3. Date Incorporated or Qualified 3a. Date of Last Report 11/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number CApplied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TAYLOR, WILLIE H 5625 N.W. 7TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33127** 83 84 City Zip Code 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 Signature, type that parted name of registered agent and late if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELFTE ___ Addition TIFLE 1.1 TITLE Change TAYLOR, WILLIE H NAME 1.2 NAME 5825 N.W. 7TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33127 CITY - ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS DiTY - ST- ZIF 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City - ST - ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE 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 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - S1 - ZIP 54 CITY-ST-ZIP DELETE THLE 61 TITLE ☐ Change Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP 14. I do hereby cert by 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 Jic 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 chapter 6, or on an attachment with an address.

SIGNATURE:

NAME

STREET ADDRESS

CITY - \$1 - 7(P)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Jan 22 1997 8:00am

Secretary of State