CR2E034 (11/98)

## 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 # **P96000104272** 

10019 NW 7TH COURT

1. Corporation Name W.S.A.S. CORP.

Principal Place of Business

10019 NW 7TH COURT

STREET ADDRESS

Mailing Address

C/O MENDIAURER & ASSOC PA

FILED

90 JUL 29 PH 2: 42

u	HAE SPHINGS PE 330/1		FT LAUDERDALE FL 33309 US				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed 12/23/1996				
2. Principal Place of Business			2a. Mailing Addr	2a. Mailing Address			4.	FEI Number	<u></u>	Applied For	
21	1						65-0717529		Not Applicable		
22	Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5.	Certificate of Status Desired []	\$8.75 Additional Fee Required		
23	City & State		City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
	Zip	Country	Zıp	Cou		79 8. This corporation owes the current year Intangible					
24		25	29	30				Personal Property Tax.	[] Yes	□No	
	9. Name	and Address of Cur	rent Registered Agent		10. Name and Address of New Registered Agent						
ASAR, SABRI						81 Name					
10019 NW 7TH COURT CORAL SPRINGS FL 33071					82 Street Address (P.O. Box Number is Not Acceptable)						
					83	83					
					84	City		F	L 85	Zip Code	
-44	Durguant to the provin	sions of Sections 607 (	1502 and 607 1508. Flori	ta Statutes, the a	hove	-named como	ratio	submits this statement for the purpose of	of changin	na 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.

ago	in londing that, and accept the congains of accept the		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE Re	gistered Agent signature i	erjored when reinstaling) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
ITLE	PSTD DELETE	1.1 TITLE	Change Addition
JAME	ASAR, SABRI	1.2 NAME	
TOCCT ANNOCCC	AAAAA AAA WAAAAAAAAAAAAAAAAAAAAAAAAAAA	13 STREET ADORESS	2000029533427

13 STREET ADDRESS

-08/06/99--01092--023 **CORAL SPRINGS FL 33071** 4 CITY-ST-ZIP CITY-\$T-ZIP DELETE 21 TITLE TITLE NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP ☐ DELETE [] Change Addition 3 1 TITLE TITLE 32 NAME NAME 33 STREET ADORESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 41 TITLE NAME 4 2 NAME 4.3 STREET ADORESS STREET ADDRESS

4.4 City-St-ZiP CITY-ST-ZIP ☐ DELETE 51 TITLE TITLE 5 2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF

54 CITY-ST-ZIP 6.1 TITLE □ DELETE 6.2 NAME

63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

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 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 in the information of the same legal effect as if made under oath; that if 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 appear Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

TITLE

NAME

4954) 938-

☐ Change

Change

Addition |

Addition



MEMBERS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

OFFICE: (954) 938-8808 FAX: (954) 938-8930

July 22, 1999

Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: W.S.A.S. Corp.

Dear Sir or Madam:

We are the accountants for the above named corporation, and enclosed you will find the annual report for the corporation along with a check for the fee of \$150.00. We respectfully ask that you accept the report and payment and ask that you not charge the delinquent filing fee.

The reason for this request is that the corporation's controller (who was directly responsible for filing the report) recently passed away prior to the timely filing date of April 30, 1999, and the report was subsequently misplaced. As can be expected, this tragedy created difficulty in the daily operations of the business, and the oversite was not discovered until now.

Please accept the report as filed along with the enclosed payment.

TN//// //

Sincerety