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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham,

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000007837 (2)

WAM MANAGEMENT I, INC.

FILED Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
1601 BELVEDERE ROAD 1601 BELVEDERE ROAD						
SUITE 407-SOUTH WEST PALM BEACH FL 33406		SUITE 407-SOUTH WEST PALM BEACH FL 33406			DO NOT WRITE IN THIS SPACE	
11201111	DENGIT C STOOL	TECH THEM DENGIT IE SONO			3. Date Incorporated or Qualified	
					01/24/1997	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-0720917 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution	
Zip	Country Zip Count		У	8. This corporation owes or has paid the current year Intengible		
24	25		30		Personal Property Tax due June 30. Yes No	
4.46	9. Name and Address of Currer	nt Hegistered Agent	8	Name	10. Name and Address of New Registered Agent	
	EYER, WILLIAM A		"	INAITIO		
	01 BELVEDERE ROAD		8:	Street /	Address (P.O. Box Number is Not Acceptable)	
	JITE 407-SOUTH EST PALM BEACH FL 33406		8			
VY	ES! PALM BEACH PL 33400			´]		
			8	City	FL 85 Zip Code	
office or r	registered agent or both in the State	of Florida. Such change was a	uthorized t	w the corr	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
agent. I a	im familiar with, and accept the oblig-	ations of, Section 607.0505, Flo	rida Statuti	s.	•	
SIGNATURE	Signature, typed or portled name of registered age	ALOTE	Designat 4		required when reinslating) DATE	
12.	OFFICERS AN		13.	jem signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	MEYER, WILLIAM A		1.2 NAME		_ , _	
STREET ADDRESS 1601 BELVEDERE RD, #407-SOUTH				t address		
CITY-ST-ZIP	WEST PALM BEACH FL 3340		1.4 CITY			
TITLE		DELETE	2.1 TITLE	07 2.1	Change Addition	
NAME		_	2.2 NAME			
STREET ADDRESS I				T ADDRESS		
CITY-ST-ZIP			2.4 CITY		·	
TITLE	DELE		3.1 TITLE		Change Addition	
NAME			3.2 NAME	}		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAM			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY+ST-ZIP			5.4 CITY-			
TITLE		☐ DELETE	6.1 TITLE	·· 1	☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADORESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 City-			

14. I hereby certify that the information supplied with this filing does not coalify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementar 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 one ownered 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 adverse.

CIGNATURE.