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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000014381 (2) DOCUMENT

THE WILD ORCHID, INC.

Principal Place of Business Mailing Address 3604 GRAND AVENUE 3604 GRAND AVENUE MIAMI FL 33133 MIAMI FL 33133 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>02/10/1997</u> 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLAHERTY, ROSEMARIE **4702 WATER OAK COURT** 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33400 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.0502, 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition 1.1 TO CE TITLE FLAHERTY, JANE F 1.2 NAME NAME 601 94TH COURT 1.3 STREET ADDRESS STREET ADDRESS SURFSIDE FL 33154 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change TITLE 2.1 TITLE FLAHERTY, ROSEMARIE 2.2 NAME NAME 4702 WATER OAK COURT 2.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410

Addition DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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5.2 NAME 5.3 STREET ADDRESS

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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 supplicmental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

CITY-ST-ZIP

CITY - ST - ZIP

CITY - ST- ZIP

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Jan 16 1998 8:00am

Secretary of State

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