## 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

P97000025744 (8) DOCUMENT #

WARRP INVESTMENTS, INC.

Principal Place of Business Mailing Address 3520 S. LONGFELLOW CIR. 3520 S. LONGFELLOW CIR. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/21/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-07416 Not Applicable 26 Suite, Apl. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country 8. This corporation owes or has paid the current pear Intangible Yes 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FILINGS, INC. LTON 3732 N.W. 16TH STREET 82 Street Address (P.O. Box Number is Not Ad FT. LAUDERDALE FL 33311-4132 83 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 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, and account the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTIONS 13. DELETE Addition TiTL€ 1.1 TITLE ☐ Change DAY, ALTON R 1.2 NAME 3520 S. LONGFELLOW CIR. 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP □ DELETE 3.1 TITLE Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 41 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 indicated on this annual report or supplierional 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 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 (3 if an inged, or on an attachment with an address.

**FILED** 

May 04 1998 8:00am

Secretary of State