

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Aug 11 1998 8:00am  
Secretary of State

DOCUMENT # P97000037659  
1. Corporation Name

WIAMBA GOLD, INC.

Principal Place of Business

Mailing Address

25-E LEXINGTON LN, W.  
PALM BEACH GARDENS, FL 33418

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/28/97

4. FEI Number

65-0747423

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 3460 FAIRLANE FARMS ROAD

Suite, Apt. #, etc.

22 SUITE 7

City & State

23 WEST PALM BEACH, FL

Zip

24 33414

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 33414

Country

30

9. Name and Address of Current Registered Agent

JOHN B. McCRACKEN  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH, FL 33401-3475

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/5/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
STREET ADDRESS MURFEY, SPENCER L., III  
CITY-ST-ZIP 25-E LEXINGTON LN, W.  
PALM BEACH GARDENS, FL 33418

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Add

1.2 NAME DPT  
1.3 STREET ADDRESS MURFEY, SPENCER L., III  
1.4 CITY-ST-ZIP 3460 FAIRLANE FARMS ROAD, SUITE 7  
WEST PALM BEACH, FL 33414

2.1 TITLE VS ☐ Change ☒ Add

2.2 NAME JOSEPH BURCIAGA  
2.3 STREET ADDRESS 3609 WASHINGTON ROAD  
2.4 CITY-ST-ZIP WEST PALM BEACH, FL 33405

3.1 TITLE ☐ Change ☐ Add

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Add

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Add

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Add

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

70000261351  
-08/12/98-01007-049  
\*\*\*550.00

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 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 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 in an attachment with an address.

SIGNATURE:

Spencer L. Murfey, III, President

Date: 8/5/98 Phone 888-680-3638