## 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 # **P97000091738**1. Corporation Name

'WHO'S 4, INC.

Principal Place of Business

3035 S FEDERAL HWY #5

Mailing Address

3035 S FEDERAL HWY #5

## **FILED** Jan 21, 1999 8:00am **Secretary of State**

01-21-1999 90004 003 \*\*\*150.00



DELRAY BEACH FL 33444		DELHAT BEACH FL 33444				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						10/23/1997			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	Арр	lied For	جزا
21		26				65-0789796 Not Applicable			\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A		Ì
22		27				5. Certificate of Status Desired	Fee Red	uired	
City & State		City & State				6. Election Campaign Financing	\$5.00 #		
23	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cou	Country		8. This corporation owes the current y	ear Intangible	- 1.1	
24	25	29	30			reisonal Floperty Tax.		JNo.	
	9. Name and Address of Current			ļ_,		10. Name and Address of New Regis	stered Agent		
	1000 1000 1000 1000 1000 1000 1000 100			81	Name				
RIELLO, JOE				82 Street Address (P.O. Box Number is Not Acceptable)					
1224 S.W. 16TH AVE						a see as a see as a see a	11 - 4 - 4 - 4 - 30 - 20 1 2 1 1 5 - 4 - 5 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
BOCA RATON FL 33486				83			<b>产用证据数</b>		i
	·.			84	City	1 \$10 \$	85 Zip C	ode	
	•	_			,	. <u></u>	<b>FL</b>	2	
.11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the a	above	e-named corpo	pration submits this statement for the purpors board of directors. I hereby accept the	oose of changing its	egistered istered	
	egistered agent, or both, in the State of m familiar with, and accept the obligation					n's board of directors. I hereby accept the	appointment as reg	10.0100	
_	m ranning with and accept the congain								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable)					nt signature required	when remember, 154.5	DATE		8
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			11/98
TITLE	P	☐ DELETE	1.1 T	TTLE			Change	- Noorgou	
NAME	RIELLO, JOE		1.2 N	AME					F034
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TITLE	STATE SECTION		4	NAME					-
NAME 100	PARTY OF THE PARTY				ET ADDRESS			, ,	
STREET ADDRESS					ST-ZIP			• •	
CITY-ST-ZIP		h this filing does not qualify				Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the in	nformation	_
44 Increhu									

indicated on this annual report or supplied with this lining does not qualify for the exemption stated in Section 119.07(3)(1), Frorida 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 on an attachment with an address, with all other like empowered.

SIGNATURE: