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

DOCUMENT #

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME P97000102013 (4)

WELLPARC II, INC.

FILED May 08 1998 8:00am Secretary of State

☐ Change

Addition

Principal Place of Business Mailing Address 150 W FLAGLER ST. STE 2000 150 W FLAGLER ST. STE 2000					- 1 VERLYDDI AIÐ EÐILLI TÐALLI ÐÐULL ÐÐULL ÐÐULL ÐÐULL ÐÐULL HÍÐU ÁFIR ÞÁÐU		
MIAMI FL 3		MIAMI FL 33130				_	
•					DO NOT WRITE IN THIS SPAC	E	
1					3. Date Incorporated or Qualified	•	
9 Principal C	Place of Pusiness	20 Mailing Addr	^^^		12/01/1997 4. FEI Number	Annilla de Fan	
	2. Principal Place of Business 2a. Mailing Address		ess		65-0808624	Applied For	
21 Suite, Apt	H Alc	26 Suite, Apt. #,	etc			Not Applicable	
22 Spite, Apr	π, Φισ.	27			5. Certificate of Status Desired S8.75 Additional Fee Required		
City & Sta	ite	City & State			6. Election Campaign Financing \$	5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current y		
24	25	29	30		Personal Property Tax due June 30.		
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registered Agen	L	
PI	ertnoy, sidney m		8	1 Name			
150 W FLAGLER ST, STE 2000				2 Street Add	eet Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33130				.]	, , , , , , , , , , , , , , , , , , , ,		
			8	3			
				4 City	85	Zip Code	
			ľ	City	FL °°	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florid	a Statutes, the abo	ve-named cor	poration submits this statement for the purpose of char	ging its registered	
office or agent. I a	registered agent, or both, in the Sta am familiar with, and accept the ob-	ate of Florida. Such chan digations of, Section 607.	ge was authorized 0505, Florida Statut	by the corpora es.	ition's board of directors. I hereby accept the appointm	ent as registered	
SIGNATURE							
	Signature, typed or printed harne of registered			igent signature requ	ired when reinstating) DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE		
TITLE	D OTTO	□ DE		- 1	LJ v	hange	
NAME			1,2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33			-ST-ZIP			
TITLE		☐ DE			<u>. </u>	hange 🗀 Addition	
NAME			2.2 NAM	E	,		
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP				'-ST-ZiP			
TITLE		[] DE	LETE 3.1 TITLE		LJC	hange Addition	
NAME			3.2 NAM	E			
STREET ADDRESS	[3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	<u> </u>	··		'-ST-ZIP			
TITLE		☐ DE	LETE 4.1 TITLE		□ c	hange 🔲 Addition	
NAME			4. 2 NAN	lE .			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DE	LETE 5.1 TITLE			hange Addition	
NAME			5.2 NAM	E			
CTOCKT ADDOCCC			5 2 CTBS	ET ADDOCCC			

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 supplied enter an 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 exemption of the corporation or the exemption of the exemption and that my name appears in Block 12 or Block 13 if changed, or only attachyool with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE