

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
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DOCUMENT #

1. Corporation Name

2770 W. W. L., Inc.

Principal Place of Business

5841 CORPORATE WAY, STE. 108
WEST PALM BEACH FL 33407

Mailing Address

5841 CORPORATE WAY, STE. 108
WEST PALM BEACH FL 33407

2. Principal Place of Business

2a. Mailing Address

21. 2770 White Wing Lane
Suite, Apt. #, etc.

27. 2770 White Wing Lane
Suite, Apt. #, etc.

City & State

23. W. Palm Beach, FL
Zip Country

City & State

28. W. Palm Beach, FL
Zip Country

24. 33409

25. USA

29. 33409

30. USA

9. Name and Address of Current Registered Agent

SIMMONS, J.
5841 CORPORATE WAY, SUITE 108
WEST PALM BEACH FL 33407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

6-2-98

4. FEI Number

65. 0847714

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81. Name

J. Simmons

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

2770 White Wing Lane

83.

84. City

W. Palm Beach

FL

85. Zip Code

33409

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent as shown on 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 of officer or director of corporation and title if applicable

(NOTE: Registered Agent signature required upon reinstating)

12. OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

SIMMONS, J

STREET ADDRESS

5841 CORPORATE WAY, STE. 108

CITY-ST-ZIP

WEST PALM BEACH FL 33407

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

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 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 recipient 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

J. Simmons (4/28/99) (561) 687-7737