

COND. NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 07, 1999 8:00 am**  
**Secretary of State**

09-07-1999 90005 016 \*\*\*150.00

DOCUMENT # **P98000080571** ✓ ②

Corporation Name

**WISDOM TRAINING/MEDIA ARTS, INC.**



Principal Place of Business  
WEST OAKLAND PARK BOULEVARD  
SUITE B19  
FORT LAUDERDALE FL 33311

Mailing Address  
2901 WEST OAKLAND PARK BOULEVARD  
SUITE B19  
FORT LAUDERDALE FL 33311  
**2461 NW 68th LANE  
MARGATE FL 33063**

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**2461 NW 68th Lane**

Suite, Apt. #, etc.  
**MARGATE**

City & State  
**MARGATE FLORIDA**

Zip  
**33063**

Country  
**USA**

2a. Mailing Address  
**2461 NW 68th Lane**

Suite, Apt. #, etc.  
**MARGATE**

City & State  
**MARGATE - FLORIDA**

Zip  
**33063**

Country  
**USA**

3. Date Incorporated or Qualified

**09/14/1998**

4. FEI Number

**650862083**

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 the current year  
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**OZTURK, JAMES**  
**2901 WEST OAKLAND PARK BOULEVARD**  
**SUITE B19**  
**FORT LAUDERDALE FL 33311**

81 Name

**OZTURK JAMES**

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

**2461 NW 68th LANE**

83

84 City **MARGATE**

**FL**

85 Zip Code

**33063**

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

OFFICERS AND DIRECTORS

		<input type="checkbox"/> DELETE
ET ADDRESS	<b>DP</b> <b>OZTURK, JAMES</b> <b>2901 W. OAKLAND PARK BLVD. STE. B19</b> <b>FT. LAUDERDALE FL 33311</b>	
ST-ZIP		
ET ADDRESS	<b>SD</b> <b>MUDRY, LILY</b> <b>786 STERLING ST.</b> <b>LONG ISLAND NY 11710</b>	<input type="checkbox"/> DELETE
ST-ZIP		
ET ADDRESS	<b>TD</b> <b>KEHAYOPULOS, FERUZE R</b> <b>3170 HOLIDAY SPG BLVD.BLDG 6, APT 306</b> <b>MARGATE FL 33063</b>	<input type="checkbox"/> DELETE
ST-ZIP		
ET ADDRESS		<input type="checkbox"/> DELETE
ST-ZIP		
ET ADDRESS		<input type="checkbox"/> DELETE
ST-ZIP		
ET ADDRESS		<input type="checkbox"/> DELETE
ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1 TITLE	<b>Address changed: see</b>	
1.2 NAME	<b>2461 NW 68th Lane ABOVE New Address</b>	
1.3 STREET ADDRESS	<b>MARGATE- FL 33063</b>	
1.4 CITY-ST-ZIP	<b>New Address</b>	
2.1 TITLE	<b>MUDRY Lily</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>1678 Cypress Pointe Drive</b>	
2.3 STREET ADDRESS	<b>Coral Springs FL 33071</b>	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 on an attachment with an address.

SIGNATURE:

**James N. Ozturk**

Date

Daytime Phone #

**9/3/99** **954**  
**345-1569**

CR2E034 (5/99)

9/2/99

To whom it may concern P98000080571  
612718-9000516

Dear Sir

I am writing to notify you  
that I did not receive  
the first notice. My new  
address is:

2961 NW 68th Lane

MARGATE - FL

33063

Tel: 954-345-1569

Please accept the initial

\$

150 fee

Thank you

James C. Ozturk