PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000081309

1. Corporation Name

WIL-MOR INTERNATIONAL, CORP.

Principal Place of Business

Mailing Address

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90218 010 ***150.00



8261 NW 8 STREET, STE. 327 MIAMI FL 3(1)26		8261 NW 8 STREET. STE 327 MIAMI FL 33126				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/18/1998					
Principal Place of Business 2a. Mailing Address							FEI Number			App	lied For
21		26					65-0865	470		Not	Applicable
Suite, Act.	#, etc.	Suite, Apt. #, etc.				-	Certificate of Status Desired				ditional
22		27				J.	Certificate of Status Desired		F	ee Re	juired
City & State		City & State	City & State			6.	Election Campaign Financing		\$5	5.00	Лау Ве
23		28				Trust Fund Contribution Added to Fees					Fees
Zip Cour try 2		Zip	Country			8. This corporation owes the current year intangible					
24	25 29		30			Persor al Property Tax. Yes No					
	9. Name and Address of Current	Registered Agent			 ———	10.	Name and Address of New I	Registere d	Agent		
W/I C	PED MELVIC		81	Ί.	Name						
WILGER, MELVIS				82 Street At dress (P.O. Box Number is Not Acceptable				able)			
8261 NW 8 STREET, STE. 327											
MAN	11 FL 33126		83	1							
			84	+	City			FL	85	Zip C	ode
office or re	to the provisions of Sections 607.05025 agistered agent, or bo h, in the State on familiar with, and accept the obligation	l Florida. Such change was	authorized by	/ th	named corporation	pration n's bo	n submils this statement for the pard of cirectors. I hereby acce	purpose of	changi ntment	ing its as reg	egistered stered
	Signature, typed or printed na ne of registered agent	and title if applicable. (NO	Ti:: Registered Age	nt s	signature required	when re	einstating)	DATE			
12.	OFFICERS ANI	· ——-	13.				ADDITICINS/CHANGES TO OF	FICERS //N			
TITLE	D	☐ DELETE	1.1 TITLE						☐ Cr	nange	Addition
NAME	WILGER, MERWIN		1.2 NAME		- 1						
STREET ADDRE 3S AVE. 19 C.C 3 NO. 1-60, MARACAIBO			1.3 STREE	1,3 STREET ADDRESS							
CITY-ST-ZIP	ESTADO ZULIA, VENEZUELA		1.4 CITY- S	ST- 2	ZIP						
TITLE	D	☐ DELETE	2.1 TITLE						CH	nange	Addition
NAME	WILGER, FARAILDO		22 NAME								Ŋ
STREET ADDRESS AVE. 19 C.C 3 NO. 1-60, MARACAIBO			2.3 STREE	T AI	ODRESS						
CITY-ST-ZIP	ESTADO ZULIA, VENEZUELA		2 4 CITY-5	ST-	- ZiP						
_IITLE	D	DELETE	31 TITLE						∏ Cl	nange	Addition
NAME	WILGER, MELVIS		3.2 NAME							-	
STREET ADDRESS	8261 NW 8 STREET, STE. 327		3.3 STREE	T AI	ADDRESS						
CITY-ST-ZIP	MIAMI FL 33126_		3.4. CITY-S								
TITLE		☐ DELETE	41 TITLE						CH	nange	Addition
NAME			4, 2 NAME								
STREET ADDRESS			4.3 STREE	T AI	ADDRESS						
CITY-ST-ZIP			4 4 CITY-S								
TITLE		DELETE	5.1 TITLE						다	nange	☐ Addition
NAME I			5.2 NAME								
STREET ADDRESS			53STREE	TA	DDRESS						
CITY-ST-ZIP			5.4 CITY-S	ST-2	ŽIΡ						
TITLE		☐ DELETE	6.1 TITLE						C	nange	Addition
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREE	T A!	DDRESS						
			6.4 CITY-S		- 1						
CITY-ST-ZIP											

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicate J 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: