PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000094721

WILD DESIGNS, INC.

Pri	ncipal F	Place of I	Busine
712	147TH	STREET.	EAST

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90164 015 ***150.00



Principal Place of Business		Mailing Add	Mailing Address					
712 147TH STREET. EAST		712 147TH S	712 147TH STREET. EAST					
BRADENTON FL 34202		BRADENTON	Bradenton Fl. 34202				DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	
		0- 11-11	A				11/06/1998 4. FEI Number Applied For	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For Not Applicable	
21			26				\$8.75 Additional	
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required	
22			27					
City & State		<u>⊢</u> '	City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees	
23			Zin Country					
Zip	Country	— — — —			7		8. This corporation owes the current year Intangible Personal Property Tax Yes No	
24	25	29		30]			Personal Property Tax. L Yes ANO 10. Name and Address of New Registered Agent	
	9. Name and Address of Curre	ent Registered Ag	jent		81	Name		
CLEN	IN IOUN				"	Hairie		
	IN, JOHN		82 Street Ad		Street A	et Address (P.O. Box Number is Not Acceptable)		
	147TH STREET, EAST							
BHAL	DENTON FL 34202				83			
					84	City	85 Zip Code	
						-	d corporation submits this statement for the purpose of changing its registered	
office or re agent. I an	egistered agent, or both, in the State of familiar with, and accept the obli-	gations of, Section	607.0505, Flori	ida Stat	utes.	rie corpo	poration's board of directors. I hereby accept the appointment as registered	
0.01	Signature, typed or printed name of registered a		(NOTE:		Agent	signature re	e required when reinstating) DATE	
12.	OFFICERS A	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE			☐ DELETE	1.1 TI	TLE		- · -	
NAME				1.2 N	AME	J	Rose Glegn S. J	
STREET ADDRESS				1.3 S1	REET.	ADDRESS		
CITY-ST-ZIP				1.4 CI	TY-ST	ZIP	Bradenton, FL. 34202	
TITLE			□ DELETE	2.1 TI	TLE		S/T Change Addition	
NAME				2.2 NAME		}	John Glepn < 1	
STREET ADDRESS				2.3 STREET ADDRES		ADDRESS		
CITY-ST-ZIP				2.40	ITY-S1	-ZIP	Bradenton, Fl. 34202	
TITLE			DELETE	3.1 TI	TLE		☐ Change ☐ Addition	
NAME				3.2 N/	AME	1		
STREET ADDRESS				3.3 S	TREET	ADDRESS	ss	
CITY-ST-ZIP				3,4. C	ITY-ST	-ZIP		
TITLE			DELETE	4.1 TI			☐ Change ☐ Addition	
NAME				4. 2 N	IAME			
STREET ADDRESS				1		ADDRESS	ss	
ì				i i	ITY-ST			
CITY-ST-ZIP TITLE			DELETE	5.1 TI			Change Addition	
				5.2 N				
NAME				5.3 S	TREET	ADDRESS	as l	
STREET ADDRESS					ITY-ST	- 1		
CITY-ST-ZIP			☐ DELETE	6.1 T			☐ Change ☐ Addition	
TITLE			- Derete	62 N			C Shares	
NAME				ı		ADDRESS	200	
STREET ADDRESS							55	
CITY-ST-ZIP				6.4 C	ITY-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 suppliemental annual report is true and accurate and that my signature shall have the same tegal 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:

CR2E034 (11/98)