FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortnam
Secretary of State
DIVISION OF CORPORATIONS

1996

	1330		17/10/014/01	CON CHAD	./I¥&1	<u></u>]	
DOCUN 1. Corporation	MENT # S0286	8	(5)				
H. WRI	GHT, INC.						
F 10 44411V	GIII; 1140:					1 10015010 111 00110 41001 10160 011	III (21) Bibli Bibli Bibli Bibli bibli bibli bibli
Principal Place	of Business	Mading	g Address			T IORATOLO DA ODDIO MORT ARINA DII	184 ION OTBAN DADIN BADAN DADIT UNDIN DIWA HODI
			~				
4630 W LANTANA RD. Lantana FL 33463) w lantana RD. Tana Fl 33463				
		Lruq	INIUN 1 E 00700				
						3. Date Incorporated or Qualified	
2. Principal Pla	a of D. cianos	1 20 14				08/23/1990 4. FEI Number	05/01/1995
21 - Frincipai Fia	ice of Busiless	F 1	nitng Address			i	Applied For
Suite, Apt. #	L etc	[26] Su	ite, Apt. #. etc.			65-0223677	Not Applicable
22	, 0.0	27	10,741 11.000.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			y & Stale			6. Election Campaign Financing	
23		28	,			Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
Ζφ	Country	Zqr	···· ·	Country		8. This corporation has liability fo	
24	25 29			30	The state of the s		
	9. Name and Address of Curre	nt Registere	d Agent			10. Name and Address of New	Registered Agent
				81	Name		
RICHARDSON, KEVIN F.			82	Street Add	ress (P.O. Box Number is Not Accepta	ables	
	RUM PLACE				Oll Oct 7 ldc7	add to the second of the processes	n res
W: PALM	BCH. FL 33401			83			
				84	City		
•			04	City		FL 85 Zip Code	
11. Pursuant to	the provisions of Sections 607,050:	2 and 607.15	i08, Florida Statut	es the above r	lamed coreo	ration submits this statement for the p	urpose of changing its registered office pointment as registered agent. I am
or registere familiar with	ed agent, or noth, in the State of Hor n, and accept the obligations of, Sec	da Such chi tion 607.050	ange was authoriz 5, Florida Statutes	red by the corp 3.	oration's boa	ird of directors. Enereby accept the ap	pointment as registered agent. I am
SIGNATURE							
5	Signational typed or parted maker of require out as a con-			HE Register (April	d saju at un tonjeas		LAIE
12.	OFFICERS AN	ID DIRECTOR		13.	· · · ·	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	P		[]] DELETE	1 1 711116			☐ Change ☐ Addition
NAME	WALPOLE, HENRY			1.2 NAME			
STREET ADDRESS	4630 W LANTANA RD.			1 3 STHEET	ADDRESS		
CITY-ST-ZIP	LANTANA FL			14 CITY S	1 - 20%		
TITLE	VST		DELETE	: 2 1 THLE			Change 🗌 Addition
NAME	WALPOLE, J. HONIE			2.2 NAME			
STREET ADDRESS	4630 W. LANTANA RD			2.3 S18EU	ADDRESS		
CITY - ST - ZIP	LANTANA FL			2 4 CITY - S	1 - 216		
TITLE			DELETE	3 1 TITLE			Change 🔛 Addition !
NAME				3.2 NAME			1
STREET ADDRESS				3.5 STEELT	ADDRESS		
CITY - ST - ZIP				34 CITY S	I ZIP		
THILE			DELETE	4 1 TOLE	į		Change 🗀 Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 S/REET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S	1 - ZiP		
TITLE			DELETE	5 1 THILE			Change Addition
NAME				5.2 NAME			
STHEET ADDRESS				53 S16EET	ADDRESS		
CITY - ST - ZIP				54 CHY S	L ZIP		_
THLE			DELETE	6 1 TIF. E			Change Addition
NAME				6 2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		
CITY - ST - 7IP				6.4 CHY-S			
14. I do hereby	certify that the information supplied	vi th this fang	g is voluntant, fund	rished and due	s not qualify f	for the exemption stated in Section 11	9.07(3)(k), Florida Statutes I further
oath; that I	am an officer or director of this adm	ual regions on oration or the	supplemental and receiver or truste	iual report is tru e empowered t	ie and accura to execute th	are and that my signature shall have the is report as required by Chapter 607, I	e same legal effect as if made under Norida Statutes, and that my name

SIGNATURE:

CHATURE AND THE DEPORT OF DISCHING OFFICER OR DIRECTOR

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JR2E034 (12/95)