FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # S25808 (4) W.S. PLAZA, INC. Mailing Address Principal Place of Business C/O WALTER SOCHA C/O WALTER SOCHA 2334 OUEENS WAY 2334 QUEENS WAY DO NOT WRITE IN THIS SPACE NAPLES FL 33982 NAPLES FL 33962 3. Date Incorporated or Qualified 01/02/1991 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0215819 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Yes 30 Personal Property Tax due June 30. 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SOCHA, WALTER J. 2334 QUEENS WAY Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33962 83 84 City Zip Code 85 11. 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 little if applicable (NOTE Registered Agent signature required whon reinstating) 10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change ■ Addition NAME SOCHA, WALTER J. 1.2 NAME 2334 QUEENS WAY STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL City-St-ZIP 1.4 CITY+ST-ZIP TITLE VSD DELETE 2.1 TITLE Change T 7 NAME SOCHA, SOPHIE K. 2.2 NAME 2334 QUEENS WAY STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE SOCHA, WILLIAM J. NAME 3.2 NAME 24 BARRY LANE STREET ADDRESS 3.3 STREET ADDRESS **SCOTIA NY** 3.4. CITY - \$1 - ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 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 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

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME ☐ Addition

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

14

DELETE