

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

FILED
Apr 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V22401 (6)
1. Corporation Name
W/L GB, INC.

Principal Place of Business
**3250 MARY STREET
5TH FLOOR, SUITE 500
MIAMI FL 33133
US**

Mailing Address
**3250 MARY STREET
5TH FLOOR, STE 500
MIAMI FL 33133-5232
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/19/1992	3a. Date of Last Report 05/01/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0331022	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WEISER, SHERWOOD M. 3250 MARY STREET 5TH FLOOR MIAMI FL 33133		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WEISER, SHERWOOD M.	1.2 NAME	
STREET ADDRESS	3250 MARY ST., STE 500	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	DAS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WEISER, JUDITH	2.2 NAME	
STREET ADDRESS	3250 MARY STREET, STE 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	DPAS ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LEFTON, DONALD E.	3.2 NAME	
STREET ADDRESS	3250 MARY ST. 5TH FL	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FISHER, ROBYN C.	4.2 NAME	
STREET ADDRESS	3250 MARY ST. 5TH FL	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	VTS ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	TEMLING, W. PETER	5.2 NAME	
STREET ADDRESS	3250 MARY ST., STE 500	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	
TITLE	VAS ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	HEWITT, THOMAS F.	6.2 NAME	
STREET ADDRESS	3250 MARY ST., STE 500	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	

14. I do 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.

CR2E034 (9/96)