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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V59238**

(8)

WOODS	SIDE, INC.		` ,							
Principal Plac	e of Business	Ma	iling Address					II OFOFF OFOIL O	1014 01041 01011	
6405 NOVA DRIVE DAVIE FL 33314			6405 NOVA DRIVE DAVIE FL 33317-7431							
							3. Date Incorporated or Qualified 08/20/1992		te of Last Re 21/1996	·
 -	lace of Business	h1	Mailing Address				4. FEI Number			plied For
Suite, Apt.	# 010	26	Suite, Apt. #, etc.				65-0357129			t Applicable
22	" , 010.	27	Gorie, Apr. W. Cio.				5. Certificate of Status Desired		\$8.75 A	
City & Stat	e	- 27	City & State				6. Election Campaign Financing		\$5.00	
23		28	•				Trust Fund Contribution		Added 1	
Zip	Country		Zip	Cou	ntry		8. This corporation has liability for	intangible	tax under s.	199.032,
24	25	29		30			Florida Statutes	T] No	
	9. Name and Address of Currer	— · · 	ered Agent				10. Name and Address of New R	egistered /	igeni	
CORPORATION SERVICE COMPANY					81	Name				
	1 HAYS STREET				82 Street Ad		ess (P.O. Box Number is Not Accepta	ble)		
TALLAHASSEE FL 32301-2525					83					
					63					
				•	84	City			85 Zip (Code
11 Durquant	to the provisions of Sections 607 000	2 and 6	17 1609 Florida Statu	toe the al		named core	paration cultimite this statement for the	FL	shanging it	o registered
office or r	rogistered agent, or both, in the Stale	of Floric	la Such change was	authorized	d by	the corporat	oration submits this statement for the ion's board of directors. I hereby acce	purpose or pt the app	ointment as	registered
	am familiar with, and accept the oblig	ations of	, Section 607.0505, F	lorida Stati	utes.					
SIGNATURE	Signature, typed or printed name of registered age	ent and little	r'annicable (NO	11 Bonistered	LAner	ol sanature requir	ed when reinstating)	DATE		
12.	OFFICERS AN	· · · · · · · · · · · · · · · · · · ·		13.			ADDITIONS/CHANGES TO OFFI		DIRECTOR	S IN 12
TITLE	D		DELETE	11 10	Ų.				☐ Change	Addition
NAME	MCDONALD, GERALD T			12 NA	ME					
STREET ADDRESS	7951 SW 6TH ST., #112			13 \$1	REET	ADDRESS				
CITY-ST-ZIP	PLANTATION FL			14 CI	IY-SI	I - ZIP				
TITLE			☐ DELETE	21111	l L f				Change	Addition
NAME				2.2 NA	AME					
STREET ADDRESS				2.2.01		ADDDL CC				
CITY-ST-ZIP				5.4.01	REF1	NDDRE22				
				2.40	IY-S					
TITLE			DELETE		IY-S				Change	Addition
NAME .			☐ DELETE	2.40	HY-S ILE				Change	Addition
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NAME STREET ADDRESS CITY-ST-ZIP				2.4 Cl 3.1 Til 3.2 NA 3.3 ST 3.4 Cl	HY-S ILE AME REFT A	5) - 7IP				
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				2.4 Cl 3.1 TH 32 NA 3.3 ST 3.4 Cl 4.1 TH 4.2 Na	HY-S TLE AME REFT A ITY-S TLE AME	a) - 7iP Address ij - 7ip				
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14. To netery certify that the information supplied with this filling closs not quality for the exemption stated in Section 119 07(3)(i), Florida Statutes. 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.

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FILED

May 14 1997 8:00am

Secretary of State