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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # V62478

W W A INVESTMENTS, INC.

(5)

Apr 14 1997 8:00am Secretary of State



1.					
Principal Plac	e of Business	Mailing Address			I BIBIO DIBIO DIDII DIDII DIDII DIDII IDDI
600 N. SURF RD. SUITE 4 HOLLYWOOD FL 33019		600 N. SURF RD. SUITE 4 HOLLYWOOD FL 33019-1418		1	
10001110051	1. 60010	TOCCITIOND IL SSO(6)	1410	3. Date Incorporated or Qualified	3a. Date of Last Report
				09/09/1992	06/12/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FLI Number	Applied For
21		26		65-0356680	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Continued of Claus Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28] Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
	9. Name and Address of Current		[30]	10. Name and Address of New Ro	
OSB	JURN, RACHAEL		81 Name		
600	N. SURF RD.		82 Street Add	ress (P.O. Box Number is Not Accepta	blo)
SUITE 4			02 Street Add	ress (r.o. box nomber is not accepta	oie)
HOL	LYWOOD FL 33019		83		
	\$+		84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both. In the State	P and 607.1508, Florida Stat of Florida, Such change was	utes, the above-named corp s authorized by the corporal	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered
agent la	m familiar with, and accept the obliga	tions of, Section 607.0505, F	Florida Statutes.	and bear of an object. Thereby does	prime type minorit de regionered
SIGNATURE	Signature, typed or printed name of registered ager		OTt : Registered Agent signature requi		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D	DLIFTE	1.1 101.6		Change Addition
NAME	AQUILA, WILLIAM		1.2 NAME	•	
STREET ADDRESS	322 BUCHANAN, APT. 1405		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CHTY-ST-ZIP		
TITLE		DELETE	21 1ITLE		Change Addition
. NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		·
CITY-ST-ZIP		····· — — incompliants	2.4 CITY+ST+ZIP		
TITLE		L_J DELETE	3.1 TITLE		L Change L Addition
NAME		•	3.2 NAME		
STREET ADDRESS		•	3.3 STREET ADORESS	·	
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITL€		Change Addition
NAME		□ otttie	4. 2 NAME		Change Notition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-S1-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		•
STREET ADDRESS	•		5.3 STREET ADDRESS		
CATY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DETETE	61 1IILF	and the second s	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			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 logal effect as if made under eath; 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.