

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V73121** (8)

1. Corporation Name

WJM INVESTMENTS, INC.

Principal Place of Business

**7241 SW 168TH ST
MIAMI FL 33157**

Mailing Address

**7241 SW 168TH ST
MIAMI FL 33157**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1992

3a. Date of Last Report

07/26/1994

4. FEI Number

65-0362774

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032

Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

Country

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VERNON, JANE D
7241 SW 168TH ST
MIAMI FL 33157**

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 607.05(2) 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 is 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 Sections 607.05(5), Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent or New Registered Agent)

(Signature of Registered Agent or Officer, Registered Agent or Officer)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)

12.1	NAME	DP
12.2	NAME	VERNON, WILLIAM G
12.3	STREET ADDRESS	7241 SW 168TH ST
12.4	CITY & STATE	MIAMI FL
12.5	NAME	DST
12.6	NAME	VERNON, JANE
12.7	STREET ADDRESS	7241 SW 168TH ST
12.8	CITY & STATE	MIAMI FL
12.9	NAME	
12.10	NAME	
12.11	STREET ADDRESS	
12.12	CITY & STATE	
12.13	NAME	
12.14	NAME	
12.15	STREET ADDRESS	
12.16	CITY & STATE	
12.17	NAME	
12.18	NAME	
12.19	STREET ADDRESS	
12.20	CITY & STATE	

13.1	NAME		☐ Change ☐ Addition
13.2	NAME		
13.3	STREET ADDRESS		
13.4	CITY & STATE		
13.5	NAME		☐ Change ☐ Addition
13.6	NAME		
13.7	STREET ADDRESS		
13.8	CITY & STATE		
13.9	NAME		☐ Change ☐ Addition
13.10	NAME		
13.11	STREET ADDRESS		
13.12	CITY & STATE		
13.13	NAME		☐ Change ☐ Addition
13.14	NAME		
13.15	STREET ADDRESS		
13.16	CITY & STATE		
13.17	NAME		☐ Change ☐ Addition
13.18	NAME		
13.19	STREET ADDRESS		
13.20	CITY & STATE		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.071, 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 a handwritten signature. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 1007, Florida Statutes, and that my name appears in Block 12 or Block 13 or is changed or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature of Secretary of State