2004 FOR PROFIT CORPORATION

SIGNATURE:

FILED ANNUAL REPORT (AR) Apr 30, 2004 8:00 am DOCUMENT # K58087 Secretary of State 1. Entity Name 04-30-2004 90361 029 ***150.00 VEITENHAUS ENTERPRISES, INC. Principal Place of Business Mailing Address 107 LINCOLN ST PO BOX X88 DEERFIELD BEACH FL 33443 DEERFIELD BEACH FL 33443 2. Principal Place of Business 3. Mailing Address 7519 River CLub Blud 7519 RIVER CLUS CR2E034 (11/03) MOORE City & State City & State 4. FEI Number Applied For **NO-T APPLICABLE** BRAdenton FL. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired us 34202 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Thom AS GEHRINGER, CHARLES J. Street Address (P.O. Box Number is Not Acceptable) 7519 RIVER CLUB BLUG 107 LINCOWN CT DEERFIELD BEACH FL 33442 City BRAden TON 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. Thomas A- VEITENHAUS -PREJIDENT Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Change ☐ Addition GEHRINGER, CHARLES J. NAME NAME STREET ADDRESS 107 LINCOLN CT STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition VEITENHAUS, THOMAS J. NAME NAME 4723 35+4 WAY 4260 S HOWELL AVE STREET ADDRESS STREET ADDRESS MILWAUKEE WI 53207 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME VEITENHAUS, LINDA A NAME RIVER CLUB BLUD. STREET ADDRESS 9850 GASPARILLA PASS BLVD STREET ADDRESS CITY-ST-ZIP BOCA GRANDE FL 33921 CITY-ST-ZIP TITLE Delete TITLE Addition MACDOUGAL, SUSAN NAME NAME STREET ADDRESS 13588 CALVADOS PL STREET ADDRESS SAN DIEGO CA 92128 CITY - ST- ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR