## SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

WEBER, GREGORY

NAPLES FL 33999

4112 23RD PLACE S.W.

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

TITLE

NAME

NAME STREET ADDRESS

NAME

NAME

P93000068735 (8)

WEBER DRAFTING, INC.

FILED Sep 23 1998 8:00am Secretary of State

Addition

Change Addition

Change Addition

Change [ ] Addition

Principal Plac	ce of Business	Mailing Address			O DINDA FARIN (BOOM RINDA DIN 1881)
5600 TRAIL BLVD SUITE #10 NAPLES FL 33963 US		5600 TRAIL BLVD #10 NAPLES FL 34108 US		DO NOT WRITE IN THIS \$PACE  3. Date Incorporated or Qualified	
				09/27/1993	
2. Principal F	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21 5600	TRAIL BLVO.	26 5600 TPAI	L BLVD	65-0438578	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	_	5. Certificate of Status Desired	\$8.75 Additional
22 SUITE #5 Crty & Stato 23 NAPLES FL. 34108		27 SUITE #	5	5. Certificate of Status Desireo	Fee Required
		City & State 28 NAPLES, FL.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 34 C		29 34108 3	© US	This corporation owes or has paid the corporation owes or has paid the corporation of the personal Property Tax due June 30.	urr <b>en</b> t year Intangible Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registere	d <b>Ag</b> ent
WEBER, GREGORY 4112 23RD PLACE S.W. NAPLES FL 33999			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83		
			84 City	F	85 Zip Code
office or	t to the provisions of sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obligations of the control of the obligations of th	of Florida. Such change was aut	horized by the corporat	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	changing its registered
	· ". 🚨 '' ( ' '		Registered Agent signature rec	uirod when reinstating) DAYE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	D	DELETE	1,1 TITLE		Change Addition
NAME	WEBER, WILLIAM		1.2 NAME		
STREET ADDRESS	1712 2010 12.02 0.11.		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 33999		1.4 CITY-ST-ZIP		
TITLE	מו	LIDELETE	2.1 TITLE		Change Addition

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 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 roceiver 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.

2.2 NAME

3.1 TITLE

3.2 NAME

4 1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

DELETE

DELETE

DELETE

DELETE

23 STREET ADDRESS

3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.3 STREET ADDRESS

24 CITY-ST-ZIP