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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9	5000075434 (7)
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S.F.E. INC.

FILED May 02 1997 8:00am Secretary of State



2. Principal Place of Business 2. Mailing Address 3. FEI Number 65-0614090 Suite Apt. # etc 2. DHAFFA FL 27 City & State 28 City & State 29 Country 20 Suite Apt. #, etc 20 City & State 20 Country 20 Country 21 Country 22 Country 23 Country 24 Country 25 Country 26 Suite Apt. #, etc. 27 Country 28 Country 29 Solution Apt. #, etc. 29 Country 30 Country 40 Co	Applied For Not Applicable 8.75 Additional Fee Required \$5.00 May Be Added to Fees under s. 199.032, to nt 5 Zip Code
DAVIE FL 33325 DAVIE FL 33325-3889 3. Date Incorporated or Qualified 09/26/1995 Q5/01/ 2. Principal Place of Business 21	Applied For Not Applicable 8.75 Additional Fee Required \$5.00 May Be Added to Fees under s. 199.032, to nit 5 Zip Code
2. Principal Place of Business 2. Mailing Address 3. FEI Number 65-0614090 Suite Apt. # etc 2. DHAFFA FL 27 City & State 28 City & State 29 Country 20 Suite Apt. #, etc 20 City & State 20 Country 20 Country 21 Country 22 Country 23 Country 24 Country 25 Country 26 Suite Apt. #, etc. 27 Country 28 Country 29 Solution Apt. #, etc. 29 Country 30 Country 40 Co	Applied For Not Applicable 8.75 Additional Fee Required \$5.00 May Be Added to Fees under s. 199.032, to nit 5 Zip Code
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Suite Apt. #. etc. DANTA	8.75 Additional Fee Required \$5.00 May Be Added to Fees under s. 199.032, ont
City & State Country State Cou	Fee Required \$5.00 May Be Added to Fees under s. 199.032, o nt
Trust Fund Contribution 8. This corporation has liability for intangible tax in Florida Statutes Plorida Statutes SCHERRER, THOMAS V 822 SW 118 TERR DAVIE FL 33325 83 84 City FL 83 84 City FL 85 11. Fursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of characteristic or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointriagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. NAME SCHERRER, MARK DASK SCHERRER	Added to Fees under s. 199.032, to nt 5 Zip Code
210 Country 210 Country 220 Country 33 00 4 25 BROWN 220 29 30 8. This corporation has liability for intangible tax in Florida Statutes 22 Yes No. 10. Name and Address of New Registered Ager 10. Nam	nt
9. Name and Address of Current Registered Agent SCHERRER, THOMAS V 822 SW 118 TERR DAVIE FL 33325 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 81 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of characteristic or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature of provisions of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE D SCHERRER, MARK SCHERRER MARK SCHERRER	nt
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HAME SCHERRER, MARK 12 NAME MARK SCHERRER	Change Addition
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STREET ADDRESS 822 SW 118 TERR DAVIE FL 89025 1.3 STREET ADDRESS 80 PLE RS ANT HILL LN TAMARAL FL 33319-2	1442
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City-St-ZIP 6.4 City-St-ZIP	

14. To hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(), 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JCHER RER

4-24-97

923-5836

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