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• PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 345274

(5)

SOUTHWEST FLORIDA ENTERPRISES, INC.

Mar 13 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address 401 NW 38TH COURT. 401 NW 38TH COURT. P. O. BOX 350940 P. O. BOX 350940 MIAMI FL 33135 MIAMI FL 33135-0940							ריש יו הקינוך יו יות יום עו הקינו היישקים	
						3. Date incorporated or Qualified 04/28/1969	3a. Date of Last 05/01/1996	Report
2. Principal Place of Business 2a. Mailing Address 21			dress			4. FEI Number 59-1263670	 	Applied For Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required		
City & Star 23		City & State		Election Campaign Financing \$5.00 May Be Trust Fund Contribution CJ Added to Fees				
Zip	Country 25	Z ip 29	30	ountry	i	This corporation has liability for in Florida Statutes	ntangible tax under Yes 🏻 No	r s. 199.032,
24	g. Name and Address of Curi					10. Name and Address of New Re		
HAN				81	Name	IN THE PARTY OF TH		
HAVENICK, FRED 401 NW 38TH CT				82		ddress (P.O. Box Number is Not Acceptab	le)	
MIC	MIAMI FL 33126				····			
				84	City		FL 85 Zi	p Code
11. Pursuant office or agent 1 a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob-	502 and 607.1508, Flo ate of Florida. Such ch ligations of, Section 60	rida Statutes, the ange was authori 7.0505, Florida S	abov zed b tatute	e-named o y the corpo s.	orporation submits this statement for the p oration's board of directors. I hereby accep	urpose of changing the appointment	its registered as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Regis	ered Ag	ent signature n	equired when reinstating)	DATE	
12.	OFFICERS A	AND DIRECTORS	1	3.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
TITLE	0		DELETE 1.	1 TITLE			Chang	e Addition
NAME	HAVENICK, BARBARA		1:	2 NAME				
STREET ADDRESS	401 NW 38TH CT.		13	3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI, FL 00000			4 CHTY-8	1-21P			
TITLE	PIE		DELETE 2.	1 TITLE			Chang	e 🔲 Addition
NAME	HAVENICK, FRED		2.5	2 NAME				i
STREET ADDRESS	401 NW 38TH CT.		2.	3 STREET	ADDRESS			Į
CITY-ST-ZIP	MIAMI, FL 00000			4 CITY-	ST-ZIP			
TITLE	D MANUEL MANUEL A		DELETE 3.	1 TITLE	[Chang	e 🔲 Addition
NAME	AMOUR, ISABELLE		3.	2 NAME		•		
STREET ADDRESS	401 NW 38TH CT.		3.5	3.3 STREET ADDRESS				İ
C(TY-ST-Z(P	MIAMI, FL 00000			4. CITY-	ST-ZIP			
TITLE	DV	L		1 TITLE			L. Chang	e 🔲 Addition
NAME	HECHT, FLORENCE			2 NAME	- 1			1
STREET ADDRESS	401 NW 38TH CT.		4.5	3 STREET	ADDRESS]
CITY-ST-ZIP	MIAMI, FL 00000			4 CITY-S	ST-ZIP		[] (t	a lades
TITLE	1	LJ	L L	1 TITLE	- {	20000211	☐ Chang	e Addition
NAME				2 NAME		80000211 -03/14/970100	3130 M001	ŀ
STREET ADDRESS			•		ADDRESS	***2041.25	100,	}
CITY-ST-ZIP		·		4 CITY-S	T-ZIP	<u> </u>		A N Addition
TITLE		LJ		1 TITLE			· L Chang	e Addition
NAME			E .	2 NAME			Ø A	\mathscr{N}_{-}
STREET ADDRESS					ADDRESS		1)/1	ン
CITY-ST-ZIP	thu costilu that the information are	lind with this filing day		4 CITY-S		ted in Section 119 07(3Vi). Florida Statute	Lituther partitud	a tha

I do nereoy certify that the information supplied with this riling does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify has 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 comporation 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 of changed. If on an attachment with an address.

SIGNATURE: