FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90166 001 *1,861.25

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 345274

1. Corporation Name

SOUTHWEST FLORIDA ENTERPRISES, INC.

Principal Place of Business Mailing Address								()00100 lum 0,001 dum 10011 mm	,,, =,,,, =,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,, 0,0,, 0,0		
401 NW 38TH COURT. 40			401 NW 38TH COURT.									
P. O. BOX 350940			P. O. BOX 350940				DO NOT WRITE IN THIS SPACE					
MIAMI FL 33135 MIAMI FL 3			AMI FL 33135	FL 33135				3. Date Incorporated or Qualifed				
								04/28/1969				
2. Principal Pl	lace of Business	2a.	. Mailing Address					FEI Number		• 117	Applied For	
21	and or bearinger	26	.				1	59-1263670			Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				7			\$8.75	Additional	
22			27				5.	Certificate of Status Desired		Fee	Required	
City & State			City & State				6.	Election Campaign Financing		\$5.0	0 May Be	
			28					Trust Fund Contribution	니 	Adde	d to Fees	
Zip	Country		Zip Country				8. This corporation owes the current year Intangible					
24	25 29 30			30				Personal Property Tax. Yes No				
	9. Name and Address of Curre	nt Regis	stered Agent				10.	Name and Address of New R	Registered /	Agent		
	ENION FRED				81	Name						
HAVENICK, FRED				82 Street Address (P.O. Box Number			O. Box Number is Not Accepta	ble)				
401 NW 38TH CT												
MIAN	MI FL 33126				83	1		•			1	
	•				84	City				85 Zi	p Code	
				_	ŀ	1			<u> </u>	. _	·	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	a of Elori	da. Such change was a	uthorized	עם ו	the corporation	oration n's bo	submits this statement for the pard of directors. I hereby accep	purpose of on the purpoing the purpoing the purpoing the purpoing the purpoing the purpoing the purpose of the	changing i ntment as	its registered registered	
SIGNATURE										_		
. Signatura in E	Signature, typed or printed name of registered ag			_	Ager	nt signature required			DATE		TODO (1) 40	
12.	OFFICERS A	ND DIRE		13.				ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC ☐ Chang		
TITLE	D·		☐ DELETE	1.1 TI						Citarià	e	
NAME	HAVENICK, BARBARA			1.2 N								
STREET ADDRESS	401 NW 38TH CT.					TADDRESS					į	
CITY-ST-ZIP	MIAMI, FL 0000		C DELETE	_		T-ZiP	_			Chang	e	
TITLE	PTE		☐ DELETE	2.1 TI						[_] Criang	C LAddition	
NAME	HAVENICK, FRED			2.2 N						•		
STREET ADDRESS:	401 NW 38TH CT.					TADDRESS						
CITY-ST-ZIP	MIAMI, FL 00000		DELETE	_		ST-ZIP			_	☐ Chang	e Addition	
TITLE	D		. DELETE	3.1 Ti						← ~ mil		
NAME	AMDUR, ISABELLE			3.2 N								
STREET ADDRESS	401 NW 38TH CT.					TADDRESS						
CITY-ST-ZIP	MIAMI, FL 00000		☐ DELETE			ST-ZIP				Chang	e Addition	
TITLE	DV		- Dereie	4.1 TI						`_ aea		
NAME	HECHT, FLORENCE			4.2N							Ì	
STREET ADDRESS				1		TADDRESS				,		
CITY-ST-ZIP	MIAMI, FL 00000		☐ DELETE	_		T-ZIP		 	_	☐ Chang	e	
TILE	_			5.1 TI 5.2 N							7.1361136.7	
NAME						TADDRESS		•	*			
STREET ADORESS	,		•	1		T-ZIP						
CITY-ST-ZIP			DELETE	5.4 C		1.71		<u> </u>	_	☐ Chang	e	
TITLE				6.2 N								
NAME						T ADDRESS						
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			0.3 3		ו השטווביי						

6.4 CITY-ST-ZIP 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 suppliemental annual report is true and accurate another 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 of 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, with all other like empowered.

SIGNATURE:

305-649-3000