Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90046 035 ***150.00

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

Mailing Address

PO BOX 848154

HOLLYWOOD FL 33084-0154

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 472225

1. Corporation Name

Principal Place of Business

11091 MINNEAPOLIS DR.

G.E.W. ENTERPRISES, INCORPORATED

HOLLYWOOD FI	L 33026	HOLLYWOOD FL 33084-0154 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
US					-					
							03/20/1975			ļ
2 Dringing Bl	ace of Business	2a. Mailing Address					FEI Number			Applied For
	ace of pusifiess	F *					59-1622194			Not Applicable
Suite, Act. #, etc.		Suite, Apt. #, etc.					35 1022 134			5 Acditional
	#, etc.	27				5. (Certifcate of Status Desired			Required
City & State		City & State				e 1	Electior Campaign Financing		\$5.0	0 Nay Be
23		28	,				Trust Fund Contribution			ed to Fees
Zip Country			Zip Country				This corporation owes the curr	ent vear lu	tangible	
	25	29	30		}		Personal Property Tax.	one your w	Yes	[]No
24	9. Name and Address of Current	- 	_ [30]				Name and Address of New I	Registered	Agent	
	S. Italia dia Addi add al Californi			81 Na	ime					
BURI	NS, ROBERT H.									
420 LINCOLN ROAD MALL			Ì	82 St	reet Address	s (P.	O. Box Number is Not Accept	able)		ì
MIAMI BEACH FL 33139				83	·			 -		
									,	
				84 Ci	ty			Fi	85 Z	ip Ccde
	to the provisions of Sections 607.0502	and CO7 1EO9 Florido Statu	t vo. the ab	01/0 00	med corners	ation	submits this statement for the		_	its registered
office or re	egistered agent, or hoth, in the State o	of Florida. Such change was a	a uthorized	by the i	corporation's	s boa	ard of directors. I hereby acce	pt the appo	intment as	registered
agent. I a	m familiar with, and accept the obligat	icns of, Section 607.0505, Flo	o ida Statu	tes.						
SIGNATURE								DATE		
	Signature, typed or printed name of registered agent	· · · · · · · · · · · · · · · · · · ·		Agent sign	ature required wh		DDITIONS/CHANGES TO OF		ND DIBEC	TOR S IN 12
12.	OFFICERS ANI	D DELETE	13.	1.1 TITLE		A	DDITIO 18/CHANGES TO OF	FICERS A	Chang	
TITLE	PD			1.2 NAME						ga
NAME	WENGERT, GERALD E		1	_						
STREET ADDRES 3	11091 MINNEAPOLIS DR.			REET ADD	RESS					
CITY-ST-ZIP	HOLLYWOOD FL			Y-ST-ZIP					Chan	ge Addition
TITLE	D	☐ DELETE	2.1 TITL						Cilan	geAdd@on_
NAME	Burns, Robert H		2.2 NA	ΛE	Ì					ì
STREET ADDRES 3	#450 420 LINCOLN RD		2.3 STF	REET ADD	RESS					ĺ
CITY-ST-ZIP	MIAMI BEACH, FL 00000		2. 4 CIT	Y-ST-ZIP						
TITLE	SD	☐ DELETE	3.1 TITL	.E					Chang	ge 🗌 Addition
NAME	Zimmerawa, Erm.		3.2 NA	3.2 NAME						
STREET ADDRES 3	301 FIRST STREET 33		33 STF	3 3 STREET ADDRESS						;
CITY-ST-ZIP	FRANFURT, NY 000000 3.4.		3.4, CIT	Y-ST-ZIP						
TITLE	D	☐ DELETE	4 1 TITI	.E					Chan	ge 🔲 Addition
NAME	GIMMELLI, LILLIAN		4, 2 NA	ME						
STREET ADDRESS	301 FIRST STREET		4.3 STF	REET ADD	RESS					
CITY-ST-ZIP	FRANKFURT NY		4.4 CIT	Y-ST-ZIP						
TITLE	PD	☐ DELETE	5.1 T/II	.E				_	Chan	ge 🗌 Addition
NAME	WENGERT, GERALD E.		5.2 NAJ	ME						
STREET ADDRESS	11091 MINNEAPOLIS DR.		5.3 STF	REET ADD	RESS					
CITY-ST-ZIP	HOLLYWOOD, FL 33026		5.4 CIT	5.4 CITY-ST-ZIP						
TITLE		DELETE 6:1		3.1 TITLE					Chan	ge Addition
NAME			6.2 NA	ΜE						
STREET ADDRESS			6.3 STE	REET ADD	RESS					

6.4 CITY-ST-ZIP

14. I hereby certify that the informatic n 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 surplimental 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 of 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, spon an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP