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 # 546250

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90084 013 ***150.00

GEORG	E S. BOGNER,SR., INC.							
Principal Plac	ce of Business	Mailing Ad	dress	_			- (11000) OURI OURI OSHIO CHICO: BURK BURK BURK DIBIK OCHK BURK BURK BURK I III	
4604 N.W. 30TH TERRACE				:			DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualifed	
							08/02/1977	
2. Principal F	Place of Business	2a. Mailing	Address	_			4. FEI Number Applied For	
21	ست نواد پیرو د	26	and the second				59-1754252 Not Applicat	
Suite, Apt.	. #, etc.	_	Suite, Apt. #, etc.				5. Certifcate of Status Desired See Required	
City & Sta	te .	City &	State				6. Election Campaign Financing \$5.00 May Be	
23	·	28					Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Cour	ntry		8. This corporation owes the current year Intangible	
24	25	29		30			Personal Property Tax. Yes	
	9. Name and Address of Curr	rent Registered A	gent		04	Manag	10. Name and Address of New Registered Agent	
₽ ∩/	CHED GEODGE 6 60]	81	Name	•	
BOGNER, GEORGE S SR 4604 N.W. 30TH TERRACE					82 Street Address (P.O. Box Number is Not Acceptable)		ess (P.O. Box Number is Not Acceptable)	
	ARAC FL 33309]	00			
IAN	MANAC FE 33309			1	83			
				Ì	84	City	FL 85 Zip Code	
				1			oration submits this statement for the purpose of changing its registered	
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable	•	E: Registered	Agen	t signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		☐ DELETE	1.1 ।।।	LE		☐ Change ☐ Addi	
NAME	BOGNER, GEORGE JR			1.2 NA	ME			
STREET ADDRESS	4625 SUN VALLEY DR			1.3 ST	REET	ADDRESS		
CITY-ST-ZIP	RALIEGH NC			1.4 CIT	Y-\$T	T-ZIP		
TITLE	D		☐ DELETE	2.1 TIT	LE		☐ Change ☐ Addi	
NAME	PANNU, DEBRA			2.2 NA	ME			
STREET ADDRESS	3201 NE 40TH STREET		5- -	2.3 STI	REET	ADDRESS"		
CITY-ST-ZIP	FT. LAUDERDALE FL			2. 4 CI	TY-S	T-ZIP		
TITLE	PD		☐ DELETE	3.1 TIT	LE		☐ Change ☐ Add	
NAME	PANNU, DEBRA			3.2 NA	ME			
STREET ADDRESS				3.3 ST	REET	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL			3,4. Cf	TY-S	IT-ZIP		
TITLE	STD		☐ DELETE	4.1 गिर्ग			☐ Change ☐ Add	
NAME	BOGNER, GEORGE, JR			4. 2 NA				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP	RALIEGH NC		□ nerete	4.4 CIT		T-ZIP		
	1		DELETE	5.1 TIT	ᄕ		□ Change □ Add	
TITLE	I .			5 2 NA	ME		Change Add	
NAME				5.2 NA		ADODESS	☐ Change ☐ Add	
	6			5.3 STI	REET	F ADDRESS	☐ Change ☐ Add	
NAME STREET ADDRESS CITY-ST-ZIP	5			5.3 STI 5.4 CIT	REET Y-S1			
NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	5.3 STI 5.4 CIT 6.1 TIT	REET Y-SI		Change Add	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			☐ DELETE	5.3 STI 5.4 CIT 6.1 TIT 6.2 NA	REET Y-SI LE ME	T-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	5.3 STI 5.4 CIT 6.1 TIT 6.2 NA	REET Y-SI LE ME REET	T-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 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 12 if changed, or on an affaciment with an address, with all other like empowered.

SIGNATURE: