

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

**FILED**  
**May 01 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F38227 (7)**  
 1. Corporation Name  
**REIFEN WAGNER EXPORT-IMPORT INC.**



Principal Place of Business <b>218 COMMERCIAL BLVD.                  SUITE 204                  LAUDERDALE-BY-THE-SEA FL 33308</b>	Mailing Address <b>218 COMMERCIAL BLVD.                  SUITE 204                  LAUDERDALE-BY-THE-SEA FL 33308</b>
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DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b> 21 Suite, Apt. #, etc. City & State Zip Country		<b>2a. Mailing Address</b> 26 Suite, Apt. #, etc. City & State Zip Country		<b>3. Date Incorporated or Qualified</b> 07/22/1981	
<b>21</b>		<b>26</b>		<b>4. FEI Number</b> 59-2194041	
<b>22</b>		<b>27</b>		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>23</b>		<b>28</b>		<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>24</b>		<b>29</b>		<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>9. Name and Address of Current Registered Agent</b> BLAHA, WALTER R. 218 COMMERCIAL BLVD. SUITE 204 LAUDERDALE BY THE SEA FL 33308				<b>10. Name and Address of New Registered Agent</b>			
				<b>81</b> Name			
				<b>82</b> Street Address (P.O. Box Number is Not Acceptable)			
				<b>83</b>			
				<b>84</b> City			
				<b>FL</b> <b>85</b> Zip Code			

**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 changing its registered office 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.**

**SIGNATURE**  
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT WAGNER, KNUT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAGNER, KNUT	1.2 NAME	
STREET ADDRESS	NUERNBERGERSTRASSE 245	1.3 STREET ADDRESS	
CITY-ST-ZIP	88 BAMBERG, WEST GERMA	1.4 CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAHA, WALTER R	2.2 NAME	
STREET ADDRESS	218 COMMERCIAL BLVD. #204	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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:** *Knut Wagner*  
 4/21/98 956 777 7725

CR2E034 (10/97)