FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

F95000003865 (1) **DOCUMENT #**

GAEDEKE MANAGEMENT, INC.

GAEDE	THE MINIARGEMENT, 1140.									
Principal Place of	of Business	M	ailing Address						Adrifa firm 184	
4131 N CENT	4131 N CENTRAL EX DALLAS TX 75204	PRESSWAY	#90	0						
							3. Date Incorporated or Qualified 08/10/1995	3a. Da	nte of Last Re	eport
2. Principal Plac	ce of Business	2a	. Mailing Address			-1/	4. FEI Number	2/22/		Applied For
1		26					-APPLIED FOR 75-	20226		Not Applicable
Suite, Apt. #	, etc	27]	Suite, Apt. #, etc.				5. Certificate of Status Desired	Ø	Fee 1	Additional Required
Oity & State		28	Orty & State				Election Campaign Financing Trust Fund Contribution		Adde	May Be d to Fees
Z (p)	Country	ļ.,	Zip	Cou	ntry		This corporation has liability for Florida Statutes	intangible S M No	tax under s	199.032,
4	25 9. Name and Address of Curre	29	stered Agent	30			10. Name and Address of New I		d Agent	
	9. Name and Address of Con-	eni negi	stered Agent		81	Name			<u> </u>	·· ····
C T CO	RPORATION SYSTEM				82	Ptroot A	ddress (P.O. Box Number is Not Accepta	ble)		
1200 SOUTH PINE ISLAND ROAD					02	Street At	BOX MUDITIESS (F. CO. DON HOLLMON TO HAVE MODERATION)			
PLANTATION FL 33324			İ		83					
					84	City			85 Zi	p Code
						i	poration submits this statement for the pu	F		
12.	S perhas hypother participation of regulative failed			13.		it Signature rec	puter when reinstaling) ADDITIONS/CHANGES TO OF	DATE FICERS A	ND DIRECTO	DRS IN 12
1 ltf	DCPT GAEDEKE, WERNER		[] הנונונ	1 1 I 1 2 N					change	
NAME court absorbe	WENDENSTRASSE 29					ADDRESS				
STELL LEDRESS CLEVST ZIP	20097 HAMBURG, GERMA	\NY				i1 - ZiP				
M.f	VS		DELFTE	2 1 1	IILE				Change Change	■ Addition
NAME	GAEDEKE, SABINE			2 2 N	AME	Į	STENER , SABINE			
STREET ADORESS	2808 MCKINNEY AVE #61	19		235	TREE I	ADDRESS	4405 WESTWAY AVE			
01x+\$1+7d	DALLAS TX 75204					ST • Z IP	DALLAS, TX 75205		Change	Addition
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STREET ADDRESS						ST - ZIP				
CATY-SA ZAF			☐ DELFIE		TITLE				Change	Addition
No.WE				62	NAME					
STREET ADDRESS				633	STREE	T ADDRESS				
6.10 67 70				640	CHY-	S1-7IP			e	A 14 . U .
certify that		nnual rep mooration	ort or supplemental ar or the receiver or trus	nnuai report tee empow			lify for the exemption stated in Section 11 curate and that my signature shall have the ethis report as required by Chapter 607,			

SIGNATURE:

SABINE STENER 2/7/96 214-528-8883

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STENER 2/7/96

District Prince P