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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000002544 (1)

SCHWARTZ & BORGES, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							C 1881188 1119 1011 10811 08111 88111 80111 80111 80111 81111 81111 81111 81111			
17846 NW 66TH PLACE 17346 NW 66TH PLACE HIALEAH FL 33015 2401 NW 4D Cintle								DO NOT WRITE IN THIS SPACE		
Boca Rodon FLB3431 Same					٠	<u>`</u>		3. Date Incorporated or Qualified 05/13/1997		
2. Principal Place of Business 21				2a. Mailing Address 26				4. FEI Number 675 104 Applied For Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Regulred		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be		
23			28					Trust Fund Contribution		
Zip	<u>-</u>			Zip Count 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9. Name and Address of Current Registered A			ered Agent				10. Name and Address of New Registered Agent		
W	OLFE, LARF	RY				B1	Name			
200 A JOHN KNOX BLVD. TALLAHASSEE FL 32303						62	Street /	Address (P.O. Box Number is Not Acceptable)		
INDAMAGOEE PE 32303						63				
						84	City	FL 85 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 em familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Stansture: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE										
Signature, typed or printed name of registered agent and title if applicable (NOTE: B 12. OF FICERS AND DIRECTORS						13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	0.110111	37 (1713) DI (1.10)	DELETE	1.17	1LE		Change Addition		
NAME	BORGE	S, JUAN C			1.2 N	AME		,		
STREET ADDRESS		NW 66TH PLACE			1.3 \$	TREE 1	ADDRESS	5401 NM 40 ELLCIE		
CITY-ST-ZIP	HIALEA	H FL 33015				ITY-S	T - ZIP	Boca Rodon CL 3 343/		
TITLE	V COLINA	DTT MADE		DELETE	2.1 Ti			Change Addition		
NAME	1	NRTZ, MARK NW 66TH PLACE			2.2 N			2401 NW 40 Circle		
STREET ADDRESS	I	H FL 33015					ADDRESS	Bosa Raton FL 3343/		
CITY-ST-ZIP TITLE	IIIACCA	111 - 03013		DELETE	3.1 T		ST-ZIP	Change Addition		
NAME					3.2 N					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					1		ST-ZIP			
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NAME					4.21	IAME				
STREET ADDRESS					4.3 S	TREET	ADDRESS			
CITY-ST-ZIP					4.4 0	iTY-\$	T - Z IP			
TITLE				DELETE	5.1 T	ITLE		Change Addition		
NAME					5.2 N	AME				
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CITY-ST-ZIP				7 55,5		ITY-S	T-ZiP	DA.		
TITLE				☐ DELETE	6.1 T			Change Addition		
NAME					6.2 N					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					6.40	ITY-S		-dis Castian 140 07/9/// Floride Statutes 1 further partifulthat the information		

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 informatio 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 any address.