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

ιģ

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

**FILED** Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 **DOCUMENT #** H74920 (0)PETER J. WERNER LTD., INC. Principal Place of Business Mailing Address 3709 SOUTH DIXIE HIGHWAY 3709 SOUTH DIXIE HIGHWAY WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/09/1985 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2602710 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Reguired 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes □ No 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WERNER, PETER J. 3709 SOUTH DIXIE HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33480** 63 84 City Zip Code 85 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 607.0506, Florida Statutes. **SIGNATURE** Signature, type-dior printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition WOOD, TERRY NAME 1.2 NAME 2369 HIDDEN LAKE DR. STREET ADDRESS 1.3 STREET ADDRESS **PALM HARBOR FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition Change TITLE 21 TITLE WERNER, PETER J. NAME 2.2 NAME 3709 S. DIXIE HWY. STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BCH. FL DITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C(TY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE. NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE

14. Thereby 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 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, or on an attachment with an address.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

CR2E034 (10/97

Change

Change

Addition

Addition