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 # H82048

(0)

AUSTRIAN-BAVARIAN ENTERPRISES, INC.

Principal Place of Business	Mailing Address
4400 DAVIE BLVD., EXT.	4400 DAVIE BLVD., E

FILED Apr 17 1998 8:00am Secretary of State



FORT LAUDERDALE FL 33317-5714 FORT LAUDERDALE FL 33317-5714 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2598112 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zφ Country Zip 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GEGEN, ERIC 4400 DAVIE BLVD. EXT. 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33317 83 84 City 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agoni and title if applicable (NOTE: Registered Agen) signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFF		ERS AND DIRECTOR	S IN 12		
TITLE	VP	DELETE	1.1 TITLE		Change	☐ Addition		
NAME	GEGEN, MARIA		1.2 NAME					
STREET ADDRESS	1601 S.W. 46TH AVE.		1.3 STREET ADDRESS					
CITY - ST - ZIP	ft. Lauderdale fl		14 CITY-ST-ZIP					
TITLE	OP	☐ DELETE	2.1 TITLE		☐ Change	Addition		
NAME	GEGEN, ERIC		2.2 NAME					
STREET ADDRESS	1601 SOUTHWEST 46TH AVE.		2.3 STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL		2. 4 CITY-ST-ZIP	* -				
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition		
NAME			32 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-2IP			j		
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition		
NAME]			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADORESS			į		
CITY-ST-ZIP			4.4 CITY - ST - ZIP					
TITLE		DELETE	5.1 TITLE		Change	☐ Addition		
NAME			5.2 NAME					
STREET ADDRESS			53 STREET ADDRESS			ĺ		
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition		
NAME			6.2 NAME			ľ		
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 in erceiver it 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 of an attachmy with an address.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

211 41

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Daytimo Phone # 0288774