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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 28 1997 8:00am

Secretary of State

Daylime Phone #

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H96247

(2)

STENGER PRODUCTS INC.

Principal Place 3909 N. OCEAI SUITE 301	N BLVD	Mailing Address 3909 N. OCEAN BLVD SUITE 301 FT LAUDERDALE FL 33308-6	201		
ft lauderdai	LE PL 33306	FI LAUDENDALE PL 333000	M20	3. Date Incorporated or Qualified 01/23/1986	3s. Date of Last Report 08/06/1996
	ace of Business	2a. Mailing Address	**	4. FEI Number	Applied For
21 4900 Suite, Apt	BANYAN LN	26 Po Box Suite, Apt. #, etc.	70855	✓ <u>59-2628542</u>	Not Applicable \$8.75 Additional
22 Suite, Apr. 1	#, U (C	27		5. Certificate of Status Desired	Fee Required
City & State	В	City & State		8. Election Campaign Financing	\$5.00 May Be
	ARAC FL	28 FT. LAUDER		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability fo	
24 333,	9 Name and Address of Currer	29 33307 3	0	Florida Statutes 10. Name and Address of New R	Yes No
OTC			81 Nam		ogawa Agam
390) APT	9 N. OCEAN BLVD #301 LAUDERDALE FL 33308	AME AGENT NEW ADDRESS	82 Stree 46 83 84 City	I Address (P.O. Box Number is Not Accepted 100 BANYAN LIVI	333/9 85 Zip Code
office or re agent. Lai SIGNATURE	to the provisions of Sections 607.055 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was aut ations of, Section 607.0505, Florid	thorized by the co	d corporation submits this statement for the proporation's board of directors. I hereby accurate require when relatating)	purpose of changing its registered apt the appointment as registered
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
THEF	PD	☐ DELETE	1.1 TITLE		L_ Change L_ Addition
NAME	STENGER, JOHN		12 NAME		
STREET ADDRESS	3909 N.OCEAN BLVD. 301 FT LAUDERDALE FL		1.3 STREET ADORES	S	
CITY-ST-ZIP TITLE	FI LAUDENDALE FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	s [†]	
CITY-ST-ZOP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		Į
STREET ADDRESS			3.3 STREET ADDRES	5	
CITY - ST - ZIP		DELETE	3.4. CHTY-ST-ZIP		Change Addition
TITLE NAME		C Ditti	4. 2 NAME		
STREFT ADDRESS			4.3 STREET ADDRESS	s	
City - St - ZiP			4.4 City-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRES	s	
City-St-ZiP			5.4 CITY-ST-ZIP		
TiltE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRES	s	

6.4 CITY+ST-ZIP

14. I do 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.