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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # 1. Corporation Name REUWER & ASSOC

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 23 1998 8:00am Secretary of State

1. Corporatio	MENT # J21076 VER & ASSOCIATES, INC.	6 (1)			
Principal Place of Business Mailing Address					
27 SE 24TH AVENUE 27 SE 24TH AVENUE					
SUITE 8 SUITE 8				1	
POMPANO BEACH FL 33062 POMPANO BEACH FL 33062			33062	DO NOT WRITE IN TH	IS SPACE
US US				3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address				06/24/1986	
21		26. Walling Address		4. FEI Number 59-2695157	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zíp	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Current	29 Bacistared Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
		Registered Agent	81 Name	10. Name and Address of New Registere	ad Agent
OT CE DATE AVENUE CHIECO					
SUITE 107			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
POMPANO BEACH FL 33062			83		·····
1					
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 am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I am antina meth and accept the obligations of, Section 607, Sep5, Florida Statutes.					
SIGNATURE	Alan trues Let	mour MA		Wann PRESURUT	1/8/98
<u> </u>	Signature, typed or printed name of registered agent		E: Registered Agent signature requir		ND DIDECTORS IN 46
12.	PT	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	ZITZMANN, MARI FRIES		1.2 NAME		,.
STREET ADDRESS	27 SE 24TH AVENUE #8		1,3 STREET ADDRESS		
C:TY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	VPS	DELETE	2.1 TITLE		Change Addition
NAME	REUWER, NANCY		2.2 NAME		
STREET ADDRESS	27 SE 24TH AVENUE #8		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Li Change Li Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	·	Change Addition
NAME			4, 2 NAME		
STREET ADDRESS	}		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE]	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I hereby certify that the information supplied with this filling 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.