## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J47930

(9)

## FILED Oct 01 1998 8:00am Secretary of State

GUENTI	HER-VORRUCKEN, INC.	<b>(</b> *)		\$ 2 <b>0 0</b> 110 <b>0</b> 110 <b>0</b> 110 1 <b>0</b> 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	Alfil Albii albii Blail Blail Ibal
Principal Plac	e of Business	Mailing Address		-{	
4915 S TAMIAMI TR SARASOTA FL 34231		4915 S. TAMIAMI TR. SARASOTA FL 34231		DO NOT WRITE IN THI	¢ <b>¢</b> Dare
US		U\$	•	3. Date Incorporated or Qualified	3 OFACE
İ				12/19/1986	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2795224	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	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30		Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
Guenth <b>e</b> r, andrew j			81 Name		
8834 FISHERMAN'S BAY BLVD			82 Street Addre	ss (P.O. Box Number is Not Acceptable)	<del>-</del>
SAR	ASOTE FL 34231				
	0		83		
	A dI		84 City		85 Zip Code
				<u> </u>	<u>-  </u>
11. Pursuant to the provisions diffections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registrated dight of 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 familiarly in, and accept the obligations of, section 607.0505, Florida Statutes.					
agent. I am in finite in the obligations of, section 607.0505, Florida Statutes.					
SIGNATURE	Ypall-Th			ENTHER, PLESIDENT 91	28 198
12.	Sylphum, typica occupinted name of the intered agent a OFFICERS AND		TE: Registered Agent signature requirement 13.	ed when reinatating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12
TITLE	PT /	DELETE	1.5 TITLE	ADDITIONS OF ANGLES TO GITTOLKS A	T
NAME	ANDREW J. GUENTHER	□ pece ie	1.2 NAME		Change Addition
STREET ADDRESS	ALCA PROLIMENTATION TO THE PARTY OF THE PART		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		ļ
TITLE	SV	DELETE	2.1 TITLE		Change Addition
NAME	GU <b>E</b> NTHER, NORMA		2.2 NAME		Situation 1
STREET ADDRESS	8834 FISHERMANS BAY BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		1
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZiP		
TITLE		DELETE	4.5 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		L DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	121		6.3 STREET ADDRESS		
CITY-ST-ZIP	Λ // <b>/</b> V/		6.4 CITY-ST-ZIP		

I hereby certify that the information specified 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 is structured and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporate 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 charges the remaindance with an address.

CIONATURE V

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9/28/00

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