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

Block 12 or Block 13 if cha

May 21 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 # K03510 SKEMA, INC. Principal Place of Business Mailing Address 3801 SW 47 AVE 8183 S W 24TH ST DAVIE FL 33324 STE 501 DAVIE FL 33314 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/20/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0023231 21 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 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GRUNDLAND, NORBERTO 8183 S W 24TH ST **B2** Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33324** 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, 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. SIGNATURE Signature, typed or pointed name of registering agost and their applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition ☐ DELETE 1.1 1111.6 Change TITLE ARANGO, MARIA PATRICIA 1.2 NAME NAME 1372 COTTONWOOD CIR STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE **GRUNDLAND, NORBERTO** 2.2 NAME 8183 S.W. 24TH ST. STREET ADDRESS 2.3 STREET ADDRESS DAVIE FL CITY-ST-ZIP 2.4 CITY - ST- ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. C/TY-ST-ZIP DELETE \_\_\_ Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing indicated on this annual leport or supply welltal annual reprofiler or director of the cooperation or the receiver or typical annual reprofiler or director of the cooperation or the receiver or typical annual reprofiler. the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information

curate and that my signature shall have the same legal effect as if made under oath, that I am an execute this eport as required by Chapter 607, Florida Statutes, and that my name appears in

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5-111-08

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