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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

K47805

SCHOONI'R ENTERPRISES, INC.

Principal Place of Business
15195 N.E. 21st Avenue 15195 N.E. 21st Avenue
N. Miami Beach, FL 33162 N. Miami Bch,

FILED Jun 11 1997 8:00am Secretary of State

N. Miami Beach, FL 33162 N. Miami Bch,										
FL 33162						3. Date Incorporated or Qualified				
2. Principal P	95 N.E 21st Ave	29 Mailing Address 2:	lst	***		4. FEI Number		A	oplied For	
21	JO N.E ZIBC AVE	26		A V		65-0112477		N	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	5. Certificate of Status Desired Fee Required				
City & State	Miami Beach, FL	City & State 28 N.Miami I	1			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24 3316		^{Zip} 33162	Co	untry		8. This corporation has liability for Florida Statutes				
<u> </u>	9. Name and Address of Current	<u></u>	100	1		10. Name and Address of New Re				
DP				81	Name					
Franklin, Jeanne										
15195 N.E. 21st Avenue					82 Street Address (P.O. Box Number is Not Acceptable)					
N Miami Beach, FL 33162					83					
47 1										
				84	City		FL	85 Zip	Code	
office or re	egistered agent, or both, in the State of	f Florida. Such change was a	authorize	ad by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ournose of	changing cintment as	its registered s registered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Fig	orida Sta	tutes	3.	,	,,			
SIGNATURE	Signalure, typed or printed name of registered agent	and title if applicable. (NOT	E Angister	ed Ago	por erutang a Inc	uired when reinstating)	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	DP	☐ DELETE	1.11	ITLE				☐ Change	Addition	
NAME	Franklin, Jeann	е	121	MAME	}					
STREET ADDRESS	DORESS 15195 N.E. 21st Ave			1 3 STREET ADDRESS						
CITY-ST-ZIP	N. Miami Beach,	FL 33162	140	HTY-S	1-2IP					
TITLE	VP	☐ DELETE	211	ITLE				Change	Addition	
NAME .	Franklin, Dean	H. Franklin	2.21	MAME						
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			2 3 STREET ADDRESS						
CITY-ST-ZIP	- N.Miami Boh, FL	22162 _	2. 4	CITY-S	ST - ZIP					
TITLE	ATTICINE DON'T I'D	DELETE	3 1 T	ITLE				☐ Change	Addition	
NAME			3.2 N	NAME						
STREET ADDRESS			335	TREET	ADORESS					
CITY-ST-ZIP			3.4.	CITY - S	81 - Z IP					
TITLE		☐ DELETE	4.11	ITLE	T-			Change	Addition	
NAME	·		4.2	NAME						
STREET ADDRESS			438	STREET	ADDRESS					
CITY-ST-ZIP			440	IIY-S	T-ZIP					
TITLE		DELETE	51 T	ITLE				Change	Addition	
NAME			5.2 N	IAME		2000022	130	135		
STREET ADDRESS			5.3 8	STREET	ADDRESS	-06/16/9701	1010)28		
CITY-ST-ZIP			5.4 (CITY - S	1 - 7/P	***165.00				
TITLE		DELETE	6.1 T					Change	Addition	
NAME			6.21	NAME				05		
STREET ADDRESS			6.3 5	6.3 STREET ADDRESS				() /	11107	
CITY-ST-ZIP				CITY-S				6	/11/97	
14. I do heret informatio I am an o	on indicated on this annual report or su	pplemental annual report is t ne receiver or trustee empow	fy for the rue and rered to	exe accu	mption state trate and the	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S	al effect as	if made ur	nder oath; thai	