

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K71691 (5)

1. Corporation Name

WALDNER ENTERPRISES, INC.



Principal Place of Business

Mailing Address

P O BOX 1240  
BOCA RATON FL 33429

P O BOX 1240  
BOCA RATON FL 33429

3. Date Incorporated or Qualified  
03/09/1989

3a. Date of Last Report  
06/19/1995

2. Principal Place of Business  
21 1600 S. Dixie Hwy  
Suite, Apt. #, etc. STE 1C  
22 City & State BOCA RATON FL  
23 Zip 33432 Country USA  
24 25 26 27 28 29 30

4. FEI Number 59-1002907  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALDNER, CHARLES E. JR.  
1869 SABAL PALM DRIVE  
BOCA RATON FL 33432

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable) 1600 South Dixie Hwy  
83 STE 1C  
84 City BOCA RATON FL 85 Zip Code 33432

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable:

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
WALDNER, CHARLES E., JR.  
2600 N. MILITARY TR #230  
BOCA RATON FL  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ST  
WALDNER, MARJORIE  
2600 N. MILITARY TR #230  
BOCA RATON FL  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP  
1600 S. Dixie Hwy #1C  
BOCA RATON, FL 33432  
Change ☒ Addition ☐  
21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP  
1600 S. Dixie Hwy #1C  
BOCA RATON FL 33432  
Change ☒ Addition ☐  
31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP  
Change ☐ Addition ☐  
41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP  
Change ☐ Addition ☐  
51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP  
Change ☐ Addition ☐  
61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP  
Change ☐ Addition ☐  
200001927388  
-08/20/96--01139--027  
\*\*\*375.00  
8/20/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles E. Waldner, Jr. 8/13/96

561-371-2797

CR2E034 (3/96)