

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90201 035 ***150.00

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DOCUMENT # M62675

1. Entity Name
SCHEVER INTERNATIONAL HOLDINGS, INC.



Principal Place of Business
**7280 W PALMETTO PARK RD
SUITE 201
BOCA RATON FL 33433**

Mailing Address
**7280 W PALMETTO PARK RD
SUITE 201
BOCA RATON FL 33433**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **65-0021385**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**FRANKE, INGRID A
7280 W. PALMETTO PARK ROAD
SUITE 201
BOCA RATON FL 33433**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	M	<input type="checkbox"/> Delete
NAME	FRANKE, INGRID	
STREET ADDRESS	7280 W PALMETTO PARK RD	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KROPKA, CHRISTOPHER	
STREET ADDRESS	178 ST. GEORGE STREET	
CITY-ST-ZIP	TORONTO, CANADA	
TITLE	DST	<input type="checkbox"/> Delete
NAME	TIKAL, MANFRED A.	
STREET ADDRESS	178 ST. GEORGE STREET	
CITY-ST-ZIP	TORONTO, CANADA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director, Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOLF VON TEICHMAN	
STREET ADDRESS	178 ST. GEORGE STREET	
CITY-ST-ZIP	TORONTO, CANADA	
TITLE	President, Secretary, Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TIKAL MANFRED A.	
STREET ADDRESS	178 ST. GEORGE STREET	
CITY-ST-ZIP	TORONTO, CANADA	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Manfred A. Tikal* **4-14-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)