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



PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			98 8:00am y of State
1. Corporatio	MENT# M	85504	(2)			
Endus	ENTERPRISES, I	NO.			1 10 0 10 4 11 10 1 4 10 0 11 14 1 0 11 11 0 0 11 1 0 0 11 0 0 11 0 1	ILDU DURU BURU AKRU AKRU BURU RAK
Principal Place of Business Mailing Address						.
% ERIC J. WEINER % ERIC J. WEINER 3199 LAKE WORTH RD. LAKE WORTH FL 33461 LAKE WORTH FL 33461					DO NOT WRITE IN	I THIS SPACE
					 Date Incorporated or Qualified 06/10/1988 	
2. Principal P	lace of Business	Za. Ma	ailing Address		4. FEI Number	Applied For
21		26			65-0063173	Not Applicable
Suite, Apt.	#, etc.	27 Su	ite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0		y & State	***	6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip		Country		Added to Fees
Zip	25	29		30	This corporation owes or has paid Personal Property Tax due June 30	
		ss of Current Registere			10. Name and Address of New Region	
WE	EINER, ERIC J.			81 Name		
	99 LAKE WORTH RD.			82 Street A	ddress (P.O. Box Number is Not Acceptable)
LA	KE WORTH FL 33461			83		
				84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Secti	ons 607.0502 and 607.1	508, Florida Statute	es, the above-named o	corporation submits this statement for the pur	pose of changing its registered
agent. I a	m familiar with, and acco	pt the obligations of, Se	ection 607.0505, Flo	rida Statutes.	pration's board of directors. I hereby accept t	no appointment as registeres
SIGNATURE	Signature, typod or printed name	of recusioned agent and title if age	olicable (NOTE	: Registered Agent signature re	equited when reinstation)	DATE
12.		FICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DP		DELETE	1.1 TITLE		Change Addition
NAME	WEINER, ERIC J.			1.2 NAME		ĺ
STREET ADDRESS	3199 LAKE WORT	H RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL		DELETE	1.4 CITY-ST-ZIP		T Observed Addition
TITLE			DELETE	2.1 TITLE		Change Addition
NAME CTREET MODRESS				22 NAME		
STREET ADDRESS CITY-ST-ZIP				2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP	• •	··
TITLE			DELETE	3.1 TITLE		Change Addition
NAME				3.2 NAME		i.
STREET ADDRESS				3.3 STREET ADDRESS		
City-St-ZIP		·		3.4. CITY+ST-ZIP		
TITLE			DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME OTREET ARROTOG				4. 2 NAME		
STREET ADDRESS CITY-ST-ZIP				4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		······································	DELETE	5.1 TITLE		Change Addition
NAME			_	5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		ļ
CITY-ST-ZIP				5.4 CITY-ST-ZIP		
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET ADDRESS		

14. Thereby 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 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 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 changed, or in in attachment with an address.

SIGNATURE:

(51) 964-3440

FILED