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

DOCUMENT # M95824

(2)

WILLIAM PETER ROMMEL ENT., INC.

FILED Apr 23 1998 8:00am Secretary of State



C/O AMY ROI 851 HYDE PA LOXAHATCHE	mmel AMY SOLGNTHALER RK ROAD	C/O.AMY ROMMER AMY JOLGISTHALER 851 HYDE PARK ROAD LOXAHATCHEE FL 33470		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/24/1988			
¬ ' '	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apl.	#. etc.	Suita, Apt. #, etc.		65-0070432	\$8.7	Not Applicable 75 Additional	
2		27			5. Certificate of Status Desired		e Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Ζίρ (4)	Country Zip 29		Countr 30	У	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current	Registered Agent	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Agent			
 100 1	MMEL, AMY SOLENTHAL	CR AML	8	Name			
851 HYDE PARK ROAD			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	XAHATCHEE FL 33470		_		- S. Don Hamber is Not ricoopiusio)		
			8:	3	·		
			84	City		85	Zip Code
					FI		
office or re agent. I ar		of Florida. Such change wa	as authorized t	y the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap		
SIGNATURE .	Signature typed or printed name of registered ager	il and title if applicable [f	NOTE Registered A	gent signature require	ed when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	TORS IN 12
TITLE	D	☐ DELETE	1.1 THLE			☐ Char	nge 🔲 Addition
NAME	ROMMEL, WILLIAM PETER		1.2 NAME				
STREET ADDRESS	851 HYDE PARK RD.		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	LOXAHATCHEE FL		1.4 CITY-	ST-ZIP			
TITLE	D DELETE		2.1 TITLE			Char	nge [_] Addition
NAME	-ROMMEL, AMT SOLENTHALER, AMY		2.2 NAME				
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP	LOXAHATCHEE FL	Distrete	2.4 CITY	-ST-ZIP			Talabe-
TITLE	D	DELETE	3.1 TITLE	- 1		Char	nge Addition
NAME	SOLENTHALER, WILL		3 2 NAME				
STREET ADDRESS	851 HYDE PARK RD.			t address			
CITY-ST-ZIP	LOXAHATCHEE FL	DELETE	3.4. CITY	· ST - ZIP		Char	nno Laddition
TITLE		F" DECEIE	4.1 TITLE	.		L Cital	nge L. Addition
NAME STREET ADDRESS			4. 2 NAM	1			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE	31-71L		Char	nge Addition
AME			5.2 NAME				
STREET ADDRESS			•	T ADDRESS			
CITY+ST-ZIP			5.4 CITY-				
TILE		DELETE	6.1 TITLE			Char	nge Addition
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	}			
14. Thereby c			y for the exem	ption stated in	Section 119.07(3)(i), Florida Statutes. I further of		
officer or of Block 12 of	on this annual report or supplemental director of the corporation or the rece or Block 13 if changed, are in an attac	annual report is true and a iver or trustee empewered hingns with an address.	to execute this	at my signatur report as requ	re shall have the same legal effect as if made u uired by Chapter 607, Florida Statutes, and that	mber dath I my riame	i; triat i am ari e appears in