

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90223 026 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000040774

1. Entity Name
WANLOU ENTERPRISES, INC.



Principal Place of Business
3210 CARIBB WAY
LANTANA, FL 33462

Mailing Address
3210 CARIBB WAY
LANTANA, FL 33462

2. Principal Place of Business
1618 CETONA DR.
Suite, Apt. #, etc.

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

City & State
BOYNTON BEACH, FL

City & State
SAME

Zip
33436

Country
USA

Zip

Country



10065925

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-1009198

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SCHROEDER, LOUIS F
3210 CARIBB WAY
LANTANA, FL 33462

7. Name and Address of New Registered Agent

Name

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

1618 CETONA DRIVE

City
BOYNTON BEACH

FL

Zip Code
33436

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

LOUIS F. SCHROEDER

4/8/03

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$160.00
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

TITLE PD
NAME SCHROEDER, LOUIS F
STREET ADDRESS 3210 CARIBB WAY
CITY-ST-ZIP LANTANA, FL 33462 ☐ Delete

TITLE DST
NAME SCHROEDER, WANDA
STREET ADDRESS 3210 CARIBB WAY
CITY-ST-ZIP LANTANA, FL 33462 ☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME SCHROEDER, LOUIS F.
STREET ADDRESS 1618 CETONA DR.
CITY-ST-ZIP BOYNTON BEACH, FL 33436 ☒ Change ☐ Addition

TITLE DST
NAME SCHROEDER, WANDA
STREET ADDRESS 1618 CETONA DR.
CITY-ST-ZIP BOYNTON BEACH, FL 33436 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

LOUIS F. SCHROEDER

4/8/03

(561) 315-7990