## **2003 FOR PROFIT CORPORATION**

## UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT#**

P00000096632

1. Entity Name



Apr 09, 2003 8:00 am 5 Secretary of State , **FILED** 

	SCHUELER ENTERPRISES, INC.									
Suffe, Apr. #, etc.   Suffe, Apr. #, etc.   Suffe, Apr. #, etc.   Suffe, Apr. #, etc.   CHECK HERE IF MAKING CHANGES  City & State   Country   Zo   Country   S. 75 Auditional   Auditional Country   Country   S. 75 Auditional   Per Required Agent   Per Req	850 NW 118	<u> </u>								
City & State  Country  Country  Country  Country  S. Certificate of Status Desired  S. State Desired  S. State Desired  S. State Desired  S. State Desired  S. Name and Address of New Registered Agent  City PLANTATION FL 33325  City PLANTATION FL 33325  City PLANTATION  S. Child Early Address (P.O. Doy, Number in Not Acceptable)  Signature, Superior Prend name in registered agent.  Signature, Si	2. Principal P	lace of Business	3. Mailing Address					BIND BIND BIN	<u>                                      </u>	
School   S	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_	☐ CHECK HERE IF MAKING	CHANGES	3	
Exp   Country   Zip   Country   S. Certificate of Status Depind   S8.75 Assistance   S8.7	City & State		City & State			<b>4.</b> F	El Number 65-1053303		·· · · · · · · · · · · · · · · · · · ·	}
SCHUELER, FRANK 850 NW 118 AVE PLANTATION FL 33325  Toy  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FLE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  THE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  OFFICERS AND DIRECTORS	Zip Country		Zip	Zip Coun		5 Certificate of Status Desired \$8.75 Addi		dditional	1	
SCHUELER, FRANK 850 NN 118 AVE PLANTATION FL 33325  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  SIGNATURE  FILE NOW!II FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III  NAME  STREET ADDRESS  OITY-SI-2P  PANTATION FL 33325  OITY-SI-2P  TITLE  Delete  TITLE  DELET ADDRESS  OITY-SI-2P  TITLE  Delete  TITLE  DELET ADDRESS  OITY-SI-2P  TITLE  DELET ADDRESS  OITY-SI-2P  TITLE  Delete  DELete  DELET ADDRESS  DITY-SI-2P  TITLE  DELET ADDRESS  DITY-SI-2P  TITLE  DELET ADDRESS  DITY-SI-2P  TITL		6. Name and Address of Curren	Registered Agent			7. N	7. Name and Address of New Registered Agent			
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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida. I am familiar with, and accept the substance of Florida in	·				FRANK W. SCHUELER					
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  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITIE  OSCHUELER, FRANK STREET ADDRESS CITY-51-2P  PLANTATION FL 33325  CITY-51-2P  TITLE  Obeleb  TITLE  ODELeb	PLANTATI	ON FL 33325								ļ
SIGNATURE   Signature registered agent.   Signature registered agent and tele if applicable   (NOTE Registered Agent algoritative received when retriatative)   DATE	•				City PLA	NTAT	Tion FL	Zip Co	325	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will the \$550.00 May be Added to Fees  10.			or the purpose of changing	j its register	ed office or regis	stered age	ent, or both, in the State of Florida. I am f	amiliar with	, and accept	1
FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10.	SIGNATURE .	Signature, typed or printed name of registered agen	at and title if applicable.	NOTE: Registere	d Agent signature requ	uired when rei	instating) DATE			
10.	After	May 1, 2003 Fee will be \$550.00								
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- 44 - 17 - 1 - 197 All and 197 All and 19 - 19 - 19 All black (Proc. doc. or 197 All and 197 All and 197 All and 198 All and	NAME STREET ADDRESS CITY-ST-ZIP			NAM Stre City	EET ADDRESS -ST-ZIP				_	

Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. Florida calculate in information supplied 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.