

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P31509** (3)

1. Corporation Name

SCHNEIDER SALES MANAGEMENT, INC.

FILED

1995 AUG -2 AM 9:18

SECRET
TALLAHASSEE, FLORIDA

Principal Place of Business

10001 SE BUTTONWOOD WAY
TEQUESTA FL 33469

Mailing Address

10001 SE BUTTONWOOD WAY
TEQUESTA FL 33469

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/23/1990

3a. Date of Last Report

04/05/1994

4. FEI Number

36-3195331

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 140 Intracoastal Point Dr. 26 140 Intracoastal Point Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 201

27 Suite 201

City & State

City & State

23 Jupiter FL

28 Jupiter, FL

Zip

Country

Zip

Country

24 33477

25 USA

29 33477

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHNEIDER, TIEN LAM
10001 SE BUTTONWOOD WAY
TEQUESTA FL 33469

B1 Name TIEN LAM SCHNEIDER

B2 Street Address (P.O. Box Number is Not Acceptable)

140 Intracoastal Drive, Suite 201

B3

B4 City Jupiter,

FL

B5 Zip Code 33477

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Tien Lam Schneider

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CS
NAME SCHNEIDER, TIEN LAM
STREET ADDRESS 10001 SE BUTTONWOOD WAY 140 T
CITY - ST - ZIP TEQUESTA FL

TITLE PT
NAME SCHNEIDER, JAMES E.
STREET ADDRESS 10001 SE BUTTONWOOD WAY
CITY - ST - ZIP TEQUESTA FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CS ☒ Change ☐ Addition
1.2 NAME SCHNEIDER, TIEN LAM
1.3 STREET ADDRESS 140 Intracoastal Point, Drive #201
1.4 CITY - ST - ZIP Jupiter, FL 33477

2.1 TITLE PT ☒ Change ☐ Addition
2.2 NAME SCHNEIDER, JAMES E.
2.3 STREET ADDRESS 140 Intracoastal Point Dr. #201
2.4 CITY - ST - ZIP Jupiter, FL 33477

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Tien Lam Schneider
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/95 407-743-9890
Date (Mandatory Filing)

CR2E034 (3/95)