FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P38977** **(5)**

1. Corporation Name
FIREWOLF, INC.

Principal Place of Business	Mailing Address
2955 MEDULLAR RD SUITE 301 LAKELAND FL 33811 US	3500 S. FLORIDA AVE STE. 2A********** LAKELAND FL 33803 US

2. Principal Place of Business 21 3500 S.Florida Ave.	2a. Mailing Address 26
Suite, Apt. #, etc. 22 Suite 2 A	Suite, Apt. #, etc. 27
City & State 23 Lakeland, Fl	City & State 28
Zip / Country 24 33803 25 US	Zip / Country 29 30

3. Date Incorporated or Qualified 05/22/1992	3a. Date of Last Report 05/11/1995
4. FEI Number 65-0333117	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	

9. Name and Address of Current Registered Agent

KAEHLER, UWE
3500 S. FLORIDA AVE.
STE. 2A
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name: Dennis P. Johnson
82 Street Address (P.O. Box Number is Not Acceptable): 100 East Main Street
83 Lakeland, FL 33802
84 City: Lakeland, FL 85 Zip Code: 33803

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: [signature] DATE: 2/14/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPST	☒ DELETE	11 TITLE	D,P , S, T,	☒ Change ☐ Addition
NAME	KAEHLER, UWE		12 NAME	Uthoff, Detlef	
STREET ADDRESS	3500 S. FLORIDA AVE. STE. 2A		13 STREET ADDRESS	3500 S. Florida Ave. STE. 2A	
CITY-ST-ZIP	LAKELAND FL		14 CITY-ST-ZIP	Lakeland, FL 33803	
TITLE		☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME			22 NAME		
STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP			24 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (12/95)

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 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 or 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 on an attachment with an address.

SIGNATURE: [signature] 2/13/96 941-644-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #