

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90010 006 ***150.00

DOCUMENT # P93000004446

1. Corporation Name
LANDS OF SCHNITZER ENTERPRISES, INC.



Principal Place of Business
11196 - 56TH PLACE NORTH
ROYAL PALM BEACH FL 33411-8826

Mailing Address
11196 - 56TH PLACE NORTH
ROYAL PALM BEACH FL 33411-8826

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 138 MEADOWLARK DR.
Suite, Apt. #, etc.
22
City & State
23 ROYAL PALM BCH. FL.
Zip
24 33411 Country
25 U.S.A.

2a. Mailing Address
26 138 MEADOWLARK DR.
Suite, Apt. #, etc.
27
City & State
28 ROYAL PALM BCH. FL.
Zip
29 33411 Country
30 U.S.A.

3. Date Incorporated or Qualified
01/20/1993

4. FEI Number
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 owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SCHNITZER, MARK J
11196 - 56TH PLACE NORTH
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent

81 Name
82 SCHNITZER, MARK J.
Street Address (P.O. Box Number is Not Acceptable)
83 138 MEADOWLARK DR.
84 City
ROYAL PALM BCH. FL 85 Zip Code
33411

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	SCHNITZER, MARK J	11196 - 56TH PLACE N.	ROYAL PALM BCH FL 33411	<input type="checkbox"/>
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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: MARK J. SCHNITZER 4/29/99 795/1892

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)