

FILE NOW: FILING FEE AFTER MAY 151 IS \$200.00

FILED

Jun 09 1998 8:00am  
Secretary of State

|                                              |                                                                                   |                                                                                                    |
|----------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>PROFIT CORPORATION ANNUAL REPORT 1998</b> |  | FLORIDA DEPARTMENT OF STATE<br>Sandra M. Northam<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

DOCUMENT # P93000009694  
1. Corporation Name  
KIWI CIRCLE INC.

Principal Place of Business  
358 BRANTLEY CLUB DRIVE  
LONGWOOD FL 32779

Mailing Address  
358 BRANTLEY CLUB DRIVE  
LONGWOOD FL 32779

DO NOT WRITE IN THIS SPACE

FEB 8, 1993

FEI # 59-3163765

Applied For  
Not Applicable

2. Principal Place of Business  
2a. Mailing Address  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country

5. Certificate of Status Desired ☐ \$5.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

3. Name and Address of Current Registered Agent  
BERGMANN, ROLF  
358 BRANTLEY CLUB DRIVE  
LONGWOOD FL 32779

10. Name and Address of New Registered Agent  
61. Name  
62. Street Address (P.O. Box Number is Not Acceptable)  
63.  
64. City  
65. State  
66. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1608, 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 607.0605, Florida Statutes.

SIGNATURE  
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

|                |                         |                                 |
|----------------|-------------------------|---------------------------------|
| TITLE          | PTSD                    | <input type="checkbox"/> DELETE |
| NAME           | BERGMANN, ROLF          |                                 |
| STREET ADDRESS | 358 BRANTLEY CLUB PLACE |                                 |
| CITY-ST-ZIP    | LONGWOOD FL 32779       |                                 |
| TITLE          | MARIC BANKS             | <input type="checkbox"/> DELETE |
| NAME           | 358 BRANTLEY CLUB PLACE |                                 |
| STREET ADDRESS | LONGWOOD, FL 32779      |                                 |
| CITY-ST-ZIP    |                         |                                 |
| TITLE          | ELIZABETH D. SCHEVELING | <input type="checkbox"/> DELETE |
| NAME           | 736 KIWI CIRCLE         |                                 |
| STREET ADDRESS | WINTER PARK, FL 32789   |                                 |
| CITY-ST-ZIP    |                         |                                 |
| TITLE          | MARTIN J. SCHEVELING    | <input type="checkbox"/> DELETE |
| NAME           | 736 KIWI CIRCLE         |                                 |
| STREET ADDRESS | WINTER PARK, FL 32789   |                                 |
| CITY-ST-ZIP    |                         |                                 |
| TITLE          |                         | <input type="checkbox"/> DELETE |
| NAME           |                         |                                 |
| STREET ADDRESS |                         |                                 |
| CITY-ST-ZIP    |                         |                                 |
| TITLE          |                         | <input type="checkbox"/> DELETE |
| NAME           |                         |                                 |
| STREET ADDRESS |                         |                                 |
| CITY-ST-ZIP    |                         |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                                                                   |
|--------------------|-------------------------------------------------------------------|
| 1.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |                                                                   |
| 1.3 STREET ADDRESS |                                                                   |
| 1.4 CITY-ST-ZIP    |                                                                   |
| 2.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           | MARIC BANKS D. SEC                                                |
| 2.3 STREET ADDRESS | 358 BRANTLEY CLUB PLACE                                           |
| 2.4 CITY-ST-ZIP    | LONGWOOD, FL 32779                                                |
| 3.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           | ELIZABETH D. SCHEVELING                                           |
| 3.3 STREET ADDRESS | 736 KIWI CIRCLE                                                   |
| 3.4 CITY-ST-ZIP    | WINTER PARK, FL 32789                                             |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           | MARTIN J. SCHEVELING                                              |
| 4.3 STREET ADDRESS | 736 KIWI CIRCLE                                                   |
| 4.4 CITY-ST-ZIP    | WINTER PARK, FL 32789                                             |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           |                                                                   |
| 5.3 STREET ADDRESS |                                                                   |
| 5.4 CITY-ST-ZIP    |                                                                   |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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.

SIGNATURE: ROLF BERGMANN 4-30-98 407-862-2206