FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00900.00 FILED FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Northam 98 MAR 19 PH 12: 50 ANNUAL REPORT Secretary of State 19970111998 DIVISION OF CORPORATIONS DOCUMENT # P 9 3 0000 849 19 (8) 500002464205--5 -03/20/98--01121--001 International Coxp. ****150.00 ****150.00 500002464205--5 -03/20/98--01121--002 ****165.00 ****165.00 DO NOT WRITE IN THIS SPACE Principal Place of Business Mailing Address 3. Dain Incorporated or Qualified 12-(18/93 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 509 Jet Suite, Apt. #, etc. 65-0459145 509 Jefferson Suite. Apt. #. etc. Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Lenia 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year intangible ☐ Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) 1401 Kimdale 35936 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 arr familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

S SIGNATURE gistared Agent signature required w en reinstating) OFFICERS AND DIRECTORS CR2F034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE ☐ DELETE 1 1 TITLE resident ☐ Change ☐ Addition Schoen berger (yeather NAME 12 NAME 500 Jefferson Aue. STREET ADDRESS 1.3 STREET ADDRESS 33972 CITY-ST-ZIP 1.4 CITY - ST-7IP DELETE TITLE 21 DILE Addition HAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY TI - ZIP 2 4 CITY - ST - ZIP Change TITLE DELETE Addition 3.1 TITLE ₩. 3.2 NAME STEET ADDRESS 33 STREET ADDRESS SITY -ST- JIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 TITLE ☐ Addition 4 2 NAME STREET ADDRESS 13 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST - ZIP DELETÉ TITLE 5 1 TOTLE ☐ Addition NAME 5.2 NAME STREET ADDRESS **S 3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZP Change titi E DELETE 6.1 TITLE STREET ADDRESS 6.3 STREET ADDRESS 64 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 suppliemental angular sport 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 of the receiver of the section of the 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. Millengo

SIGNATURE:

March 9, 1997



FLORIDA DEPARTMENT OF STATE SANDRA B MORTHAM SECRETARY OF STATE TALLAHASSEE, FL

RE: SCHOGUN INTERNATIONAL CORP

I have received a notice that my corporation has been dissolved for non payment of the Corporate Annual Report.

This report was mailed with my check #441 dated February 15, 1997, in the amount of \$165.00.

I have returned to the country to find the check has not cleared and I have received a letter from you.

Enclosed is a copy of the original report, and a replacement check for \$165.00. It was not my intention to dissolve this corporation.

Guenther Schoenberger

509 Jefferson Ave Lehigh Acres, FL 33938

Enclosure: Copy Doc #P93000084919

Check to replace #441