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

CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

Secretary of State 1998 P94000048587 (7)

SOUTHWIND ENTENENISES, INC.						
Principal Plac	o of Business	Mailing Address				
·		·				
3332 SOUTHERN CAY DRIVE JUPITER FL 33477		3332 SOUTHERN CAY DRIVE JUPITER FL 33477				
US		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
						06/20/1994
	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0525409 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required
22		City & State				
City & State	e	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country			Zip Country			8. This corporation owes or has paid the current year Intangible
└ ── `	25	29	30			Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curre		100			10. Name and Address of New Registered Agent
010				81	Name	
CIOFFI, JAMES A 250 TEQUESTA DR				82	Street Addre	ess (P.O. Box Number is Not Acceptable)
SU	ITE 200			83		
TE	QUESTA FL 33469			Ш		
 				84	City	FL 85 Zip Code
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						d when reinstating) DATE
	Signature typed or printed name of registered ag	ent and title if applicable. ID DIRECTORS	(NOTE: Regist		t signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AN	DELETE		1 TITLE	1	Change Addition
NAME	GARLICK, JOHN C		•	2 NAME		_ · · _
STREET ADDRESS	Critical, Solition		3 STREET A	ADDRESS		
	JUPITER FL 33477		1.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	JUFILEN FE 35477	☐ DELETE		1 TITLE	- 111	Change Addition
NAME		—		2 NAME		
STREET ADDRESS				3 STREET A	ADDRESS	NA M
1				4 CITY-ST		
CITY-ST-ZIP TITLE		DELETE		TITLE	1-24	Change Addition
NAME				2 NAME		
STREET ADDRESS				3 STREET A	ADDRESS	
			1	4. CITY - ST		
CITY-ST-ZIP TITLE		☐ DELETE		1 TITLE		☐ Change ☐ Addition
NAME				2 NAME	1	
STREET ADDRESS				3 STREET A	NDDRESS	
				4 CITY-ST	1	
CITY-ST-ZIP		DELETE		TITLE	- Cit	Change Addition
NAME			3	2 NAME		_ · _ ·
1				3 STREET A	ADDRESS	
STREET ADDRESS			1	4 CITY-ST		
CITY - ST - ZIP		☐ DELETE		1 TITLE	- 416	Change Addition
				2 NAME		
NAME				2 NAME 3 STREET /	ADDDGGG	
STREET ADDRESS						
CITY - \$T - ZIP	L		6,4	4 CITY-ST		Continue 140 07/23(i) Elevide Statutes I further continue 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 cath; 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 chapter d. or in an attachment with an address.

FILED

Jan 15 1998 8:00am