

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

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # <u>P94000073596</u> 1. Corporation Name <u>Flamingo Collection, Inc.</u>		

FILED
97 MAY -2 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business <u>1314 Cape Coral Pkwy.</u> <u>Cape Coral, FL 33904</u>	Mailing Address <u>P.O. 68</u> <u>Cape Coral, FL 33910</u>
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2. Principal Place of Business <u>1314 Cape Coral Pkwy</u> Suite, Apt. #, etc. <u>204</u> City & State <u>Cape Coral Florida</u> Zip <u>33904</u> Country <u>USA</u>	2a. Mailing Address <u>P.O. 68</u> Suite, Apt. #, etc. <u></u> City & State <u>Cape Coral Florida</u> Zip <u>33910</u> Country <u>U.S.A</u>
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3. Date Incorporated or Qualified	3a. Date of Last Report <u>1996</u>
4. FEL Number <u>65-0567512</u>	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 <u>Walter J. Raulhof</u> <u>5265 Haulibus Drive</u> <u>Cape Coral, FL 33904</u>	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code <u>FL</u>

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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>PSD</u> ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	<u>Heriberto Weinlauf</u>	1.2 NAME	
STREET ADDRESS	<u>5740 Flamingo Dr.</u>	1.3 STREET ADDRESS	<u>400002167854--1</u>
CITY-ST-ZIP	<u>Cape Coral, FL 33904</u>	1.4 CITY-ST-ZIP	<u>-05/06/97--01100--009</u>
TITLE	<u>-VP-</u> ☐ DELETE	2.1 TITLE	<u>****165.00 ****165.00</u>
NAME	<u>Walter J. Raulhof</u>	2.2 NAME	☐ Change ☐ Addition
STREET ADDRESS	<u>5265 Haulibus Drive</u>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<u>Cape Coral, FL 33904</u>	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: Walter J. Raulhof 4/30/97 941 540 0279
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)