FILE	NOW: FILING FEE	AFTER MAY 1 IS	\$22	25.0	0	· ₁			
CORPO ANNUA	PROFIT CORPORATION ANNUAL REPORT 1996 FLORIDA DEPARTMENT Sandra B. Morth Secretary of Sta DIVISION OF COHPOL			ım ıa					
DOCUMENT # P9500008258 (2) 1. Corporation Name BERLIN WALL ENTERPRISE, INC.									
Principal Place of 2455 EAST SU SUITE 905	NRISE BLVD.	SUITE 905	2455 EAST SUNRISE BLVD.				3a. Date of Last		
FT. LAUDERDA	ILE FL 33304	FI. ENOUGHDAGE TE W				3. Date Incorporated or Qualified 02/01/1995	3a. Date of Last		
2. Principal Plac	e of Business	2a. Mailing Address				4. FEI Number 65-0560057		Applied For Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired		75 Additional e Required	
22 City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
23 Zip	Coding Fig.			Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes \(\subseteq No \)					
24	1231		30	10. Name and Address of New Registered Agent					
	9. Name and Address of Curre	ent Registered Agent		81	Nanie	TO. Hamb Lite			
				15.					
GREENE, RICHARD P				82	Street Ac	ddress (P.O. Box Number is Not Accepta	ne)		
2455 EAST SUNRISE BLVD.				83			<u></u>		
SUITE 9							7: O. J.		
FT. LAUDERDALE FL 33304				84	,		FL 85	Zip Code	
or registere familiar wit	h, and accept the obligations of, Se	ection 607.0505, Florida Statutes	à. ´			poration submits this statement for the property of directors. I hereby accept the applications are statement for the property accept the applications are statement for the property accept the applications.	urpose of changing pointment as registe	its registered office ered agent. I am	
Signature, typed or printed name of registered agent and trent acceptage.					at signal ire fec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	/ <u></u>	AND DIRECTORS		1 THE			☐ Char	nge 🔲 Addition	
TITLE	, D			1.2 NAM5					
NAME WILLIAMS, JOSEPH H			1.2 NAME		r ADDRESS				
STREET ADDRESS	721 MESQUITE RD.			4 CITY	i				
CITY - ST - ZIP	SEVERN MD 21144	DELETE		1 TITLE			Cha	nge 🔲 Addition	
TITLE	D		1 4		1				

CR2E034 (12/95) N S TI 2.2 NAME ROSSKOTHEN, JUERGEN J NAME FRIEDRICH-WILHELM-STR. 90 2 3 STREET ADDRESS STREET ADDRESS 2 4 CHY-ST-ZIF 12099 BERLIN, GERMANY Addition ☐ Change CITY-SI-ZIP DELFIE 3 1 11TLE TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP ☐ Change Addition CITY-ST-ZIP DELETE 4.1 11111 TITLE 4.2 NAMÉ 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIE ☐ Change ☐ Addition CHY-ST-ZIP DELETE 5 1 TITLE TITLE 52 NAME 5.3 STREET ADDRESS STREE1 ACCRESS 5.4 CHY - \$1 - ZIP 9000017559@@ge | Addition CITY-ST-ZIP 6 1 THE DELETE -03/25/96--01053--001 TITLE 6.2 NAME ***200.00

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this aimsel report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR