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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000008426

1. Corporation Name

SCHIESSL, INC.

FILED Feb 10, 1999 8:00am Secretary of State

02-10-1999 90013 005 ***150.00



Principal Place of Business Mailing Address 9410 N.W. 3RD STREET 9410 N.W. 3RD STREET PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/30/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0566949 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation owes the current year Intangible 24 30 Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SCHIESSL, PETER Street Address (P.O. Box Number is Not Acceptable) 9410 N.W. 3RD STREET PEMBROKE PINES FL 33024 83

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.

84 City

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature requi ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE ☐ Change 11 TITLE TITLE SCHIESSL, PETER NAME 1.2 NAME 9410 N.W. 3RD STREET STREET ADDRESS 1.3 STREET ADDRESS 12 PEMBROKE PINES FL 33024 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change 2.1 TITLE TITLE SCHIESSL, MIRTA 2.2 NAME NAME 9410 N.W. 3RD STREET STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL 33024 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 517ITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

ATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//9/1943 50 046 5 Date Daytimo Phone # CR2E034 (11/98)

Zip Code

85