## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

· PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

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FREEWHEELER MANAGEMENT CORP. Mailing Address Principal Place of Business 85960 OVERSEAS HIGHWAY 85960 OVERSEAS HIGHWAY ISLAMORADA FL 33036 ISLAMORADA FL 33036 3a. Date of Last Report 3. Date Incorporated or Qualified 05/31/1995 Applied For 4. FEI Number 2a. Mailing Address 65-0591250 Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199 032 Country Zιο Country Zio Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name EL KOURY, DAHER Street Address (P.O. Box Number is Not Acceptable) 82 119 TEQUESTA STREET TAVERNIER FL 33070 83 Zip Code 84 City 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. Thereby 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 reinstating) Signature, typed or printed name of registered agent and tire if applicable (96/E)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition 12. DELETE 1.1 TITLE TITLE CR2E034 1.2 NAME WHEELER, ALEXA NAME 1.3 STREET ADDRESS 117 TEQUESTA STREET STREET ADDRESS 1.4 CITY - ST - ZIP **TAVERNIER FL 33070** Change Addition CITY-ST-ZIP DELETE 2.1 TITLE 400001941144 TITLE Ð 22 NAME -03/06/36--01052--008 EL KOURY, JOHN NAME 2.3 STREET ADDRESS 211 GARDENIA ST \*\*\*\*225.00 STREET ADDRESS \*\*\*\*225.00 2.4 CITY - ST-ZIP **TAVERNIER FL 33070** Change Addition CITY-ST-ZIP 3 1 TITLE DELETE TITLE EL KOURY, DAHER NAME 3 3 STREET ADDRESS 119 TEQUESTA ST STREET ADDRESS 34 CITY-ST-ZIP TAVERNIER FL 33070 CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE 4 2 NAME MUSCI, FRANK NAME 4 3 STREET ADDRESS 9127 SW 123RD AVENUE COURT STREET ADDRESS 4.4 CITY - ST - 2IF **MIAMI FL 33186** CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-28P Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 6 4 CITY - ST - ZIP Aug 21, 1996

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