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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 POCUMENT # P9500049585 (9)

FILED
Jun 18 1998 8:00am
Secretary of State

MUNKWITZ, BOUHAN ENTERPRIZES, INC. Principal Place of Business Mailing Address 6900-29 DANIELS PKWY 6900-29 DANIELS PKWY FORT MYERS FL 33912 FORT MYER\$ FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/23/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 65-0591026 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 MUNKOWITZ, TRACY 6900-29 DANIELS PKWY 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33912-1586 83 84 City Zip Code 85 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 (NOT) Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TIME 1.1 TITLE **BOUHAN, JOHN 3** NAME 12 NAME 740 PATRRIDGE CT 1.3 STREET ADDRESS STREET ADDRESS MARCO ISLAND FL 33937 1.4 CITY - ST-ZIP CITY-ST-ZIP DELFIE Channe Addition TITLE 2.1 T(T(E **BOUHAN, JUNE M** NAME **2.2 NAME** 740 PATRRIDGE CT 2.3 STREET ADDRESS STREET ADORESS MARCO ISLAND FL 33937 2. 4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 TITLE MUNKWITZ, TRACY 3.2 NAME NAME 3719 WINKLER AVE UNIT 1424 STREET ADDRESS 3.3 STREET ADDRESS FT MYERS FL 33916 CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELFTE Change Addition TITLE 4.1 TITL€ NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ___ Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an altachment with an address.

SIGNATURE.

Orly A Buy

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941-268-3045