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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # **P96000028386**

SCHWARZE CUSTOM BUILDERS, INC.

rincipal Place of Business	Mailing Address
A E EAU GALLIE BLVD. SUITE 100	213-A E EAU GALLIE BLVD. SUITE 100 INDIAN HARROUR REACH FL 32937

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90051 001 ***150.00



	JUR BEACH FL 32937 INDIAN HARBOUR BEACH FL 32937			DO NOT WRITE IN THIS SPACE		
					3. Date Incorpo ated or Qualifed 03/25/1996	
rincipal F	Place of Business	2a Mailing Address			4. FEI Number Applied For	7
		26			59-3377082 Not Applicable	,
Suite, Apt	. #, εtc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$\frac{\\$3.75}{\}\$ Additional Fee Required	
City & Sta	te	City & State			6. Election Carr paign Financing Trust Fund Contribution \$5.00 May Ber Added to Fees	
Zip .	Country 25	Zip	Cou	ntry	This corporation owes the current year Intang ble Personal Property Tax.	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	_
	Halilo alla Additos (1 od	Tone rogination rigoni		81 Name		7
SCH	HWARZE, ERIC D					_
	-A E EAU GALLIE BLVD, SUIT	E 100		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
IND	IAN HARBOUR BEACH FL 32	937		83		7
				84 City	rporation submits this statement for the purpose of changing its registered	
office or	registered agent, or both, in the S am familiar with, and accept the of	tate of Florita. Such change w oligations of Section 607.0505	vas author zec i, Florida Sitati	i by the corporati utes.	tion's board of directo's. I nereby accept the appointment as registered	
	Signature, typed or printed name of re-listered			Agent signature require		-1 :
	 	S AND DIRECTORS DELET	13.	n	ADDITIONS/CHANGES TO OFFICERS AND LIRECTORS IN 12 Change	_ :
	PO FRANCE FRO D	☐ DELE			Orange	" []
	SCHWARZE, ERIC D	CHITE 400	12 N			
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I hereby certify that the information supplied with this f ling does not qualify for the exemption stated in Sect on 119.07(3)(i), Florida Statutes. I further certify hat the information indicated on his annual report or suppliemental 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 trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Elock 13 if changed, or on an attachment with an address, with all other like empowered.