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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000051489 (8)

cipal Place of Business	Mailing Address
71 4 PRESIDENTIAL CT.	6371-4 PRESIDENTIAL CT.
Myers Fl 33919-3548	FT. MYERS FL 33919-3548

FILED May 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/14/1996 Applied For Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees 28 Zip Zio Country Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. □ No 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JESSEN, ANDREW 6371-4 PRESIDENTIAL COURT 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33919-3548 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE Change Addition TITLE 1.1 TITLE RAUSCHENBERGER, UDO NAME 1.2 NAME R2E034 6371-4 PRESIDENTIAL CT. STREET ADDRESS 1.3 STREET ADDRESS FT. MYERS FL 33919-3548 1.4 CITY - S1 - ZIP CITY-ST-2IP DELETE Change Addition TITLE 21 IIILE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP Change DELETE 4.1 1ITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-S1-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 or the receiver or inside employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or in an attackment with an address.