## 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 # P96000061181 (9)

SCHICKEDANZ BROS. - 3860 GULF BLVD., INC.

## **FILED** Feb 11 1998 8:00am Secretary of State



Principal Place of Rusiness Mading Address		{			
Principal Place of Business Mailing Address					
2692 CORAL ŁANDINGS BLVD PALM HARBOR FL 34684	2692 CORAL LANDING PALM HARBOR FL 346	2692 CORAL LANDINGS BLVD			
FALM HANDUM FL 39009	FALM MARBON PL 346	107		DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
				07/19/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 59-3425732.	Applied For
21	26			APPLIED FOR	Not Applicabl
Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
2	27			C. Commente de Canada Potencia	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
3	28	Count		Trust Fund Contribution	Added to Fees
Zip Country 25	Zip	<b></b>	У	8. This corporation owes or has paid the c	urrent year Intangible
9. Name and Address of Curr	29  ent Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registered	
	on nogon	81	Name	10, traine and readings of the property	
PRATESI, EMIL G					
1253 PARK ST		82	Street Add	ddress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34616		83	<del></del>		
		84	City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607 0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli	100 - 1007 1000 Florida Cur	1 1 2 2 2 2 2 2		- anation on harita this statement for the surross	of changing its registers.
SIGNATURE Signature typed or profed harne of regulations.				ired when reinstating) DATE	
	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE PD	DELETE	1.1 TITLE			Change Addition
NAME FLAIG, GUNTHER		1.2 NAME	. 1		
STREET ADDRESS 2692 CORAL LANDINGS BL	VD.	1.3 STREE	T ADDRESS		
CITY-ST-ZIP PALM HARBOR FL		1,4 CITY -	ST-ZIP		
TITLE	DELETE	2.1 TITLE			Change Addition
NAME		2.2 NAME	ì		
STREET ADDRESS		2 3 STREE	1 ADDRESS		
CITY-ST-ZIP		2. 4 CITY	-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	7		Change Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREE	T ADDRESS		
CITY-ST-ZIP		3.4. CITY	ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	\		Change Addition
NAME		4. 2 NAM			
STREET ADDRESS		4.3 STREE	T ADDRESS		
CITY-S1-ZIP		4 4 CITY-	ST-ZIP		
TITLE	☐ DELFTE	5.1 TITLE	[		Change Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREE	1 ADDRESS		
CHY-ST-ZIP		5.4 CITY-			
TITLE	DELETE	6 1 TITLE			Change Addition
NAME		62 NAME	ĺ		
STREET ADDRESS		6.3 STREE	T ADDRESS		
CITY-ST-ZIP		6.4 CITY-			
CITY-ST-ZIP	with this fillius decorded qualifi	6.4 CITY-	ST-ZIP	Section 110 07(3Vi) Florida Statutos   further	cartify that the inform

operfor quality for the exemption stated in Section 119.07(3)(I), Florida Statutes. Turner certify that the informatic Vis five and accurate and that my signature shall have the same legal effect as if made under oath; that I am an onlipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual report officer or director of the corporation or the regerver or truster of Block 12 or Block 13 if changed, or on an attachment with in a

SIGNATURE:

2/4/98 (43) 789-5300