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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State Convictions

1998
DOCUMENT #

Principal Place of Business

P96000063235 (1)

Mailing Address

SCHUENEMANN CORPORATION

1401 BRICK	ELL AVE	1401 BRICKELL AVE						
850 MAMI FL 33131		850 Miami Fl 33131			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified			
1					07/29/1996			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applie	d For		
		26			65 0932539 Not A	pplicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired \$8.75 Add			
		27			Fee Requi	red		
City & State		City & State			6. Election Campaign Financing \$5.00 Ma			
Zip Country		Zip Country			Trust Fund Contribution Added to F			
	<u>├</u> ─¬ ´		30	у	8. This corporation owes or has paid the current year Intang Personal Property Tax due June 30. Yes N			
24	25 9, Name and Address of Current i		[30]		10. Name and Address of New Registered Agent	· · · · · ·		
G	OUR D DONALD		8	Name				
^ ~ ~ ~	401 BRICKELL AVE STE 850 CHAMPEL 33131	CK allian!	RD -	1-2	41 - 100 D. N			
ا ا	HAMPEL 33134	O S O O O PAIN	K) 8:		Address (P.O. Box Number is Not Acceptable)			
] "	\mathcal{M}	Juani Black,	1 6 B					
	•	32141	-	1				
	`	J~, , ,	8	City	FL 85 Zip Cod	16		
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
Signature, tyred or product name of registered apent and bile if applicable, (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II			
TITLE	OPT WARENCE HEIDI	☐ DELETE	1.1 TITLE		D/VP LJ Change L	Addition		
NAME	KADERSCH, HEIDI		1.2 NAME		Rolf Morstadt 6585 Allison Ro	ađ		
STREET ADDRESS	7TH FL., 1110 BRICKELL AVE	•		T ADDRESS	Miami Beach, F1. 33141			
CITY-ST-ZIP TITLE	MIAMI FL 33131 S	DELETE	1.4 CITY-	ST-ZIP	Change	Addition		
NAME	KADERSCH, ELKE	[] DELL'IE	2.2 NAME		Li oriango L	J MOONION		
STREET ADORESS	7TH FL., 1110 BRICKELL AVE			1 Adoress				
CITY-ST-ZIP	MIAMI FL 33131	•	2.4 CITY					
TITLE	1711 1 L 30101	DELETE	3.1 TITLE	31-211	☐ Change	Addition		
NAME	D/VP		3.2 NAME			ì		
STREET ADDRESS	ROLF MORSTADT 65	85 Allison	3.3 STREE	T ADDRESS				
CITY-ST-ZIP	Rd. Miami Beach.		34. CITY	S1 - 7/P				
TOLE		DELETE	41 TITLE		Change	Addition		
NAME			4. 2 NAM					
STREET ADDRESS			4.3 STREE	T ADDRESS		ľ		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		-		
TITLE		☐ DELETE	5.1 TITLE		Change [Addition		
NAME (5.2 NAME					
STREET ADDRESS			5.3 STREE	t address		ŀ		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		1.4399		
TITLE		DELETE	6 1 11TLE		L_I Change L	_ Addition		
NAME			6.2 NAME			ľ		
STREET ADORESS				1 ADDRESS				
CITY-ST-ZIP	perlify that the information simulated out	this filling door not qualify to	6.4 CiTY-		od in Section 119 07(3)(i) Florida Statutos I further certify that the info	rmation		
14. I hereby 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 eath; 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 Block 13 if changed, or 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 Block 13 if changed, or of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in								

03.25.98