

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1012

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 AUG -5 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000095362 (5)

1. Corporation Name

WHITE EAGLE OF SOUTH FLORIDA, INC.



DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 3. Date Incorporated or Qualified 11/21/1996 | 3a. Date of Last Report |
| 4. FEI Number N/A | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|---|---------------------|---|----|
| Principal Place of Business 1722 SOUTHEAST 44TH TERRACE CAPE CORAL FL 33904 | | Mailing Address 1722 SOUTHEAST 44TH TERRACE CAPE CORAL FL 33904 | |
| 2. Principal Place of Business | 2a. Mailing Address | 21 | 26 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 22 | 27 |
| City & State | City & State | 23 | 28 |
| Zip | Country | 24 | 30 |

| | | |
|---|--|--|
| 9. Name and Address of Current Registered Agent AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 | | 81. Name |
| | | 82. Street Address (P.O. Box Number is Not Acceptable) |
| | | 83. |
| | | 84. City |
| | | 85. Zip Code |

| | |
|--|--|
| 10. Name and Address of New Registered Agent | |
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| | |
| | |

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------------|---|-----------------------|
| TITLE | P WIEDMANN, WONGENG | 1.1 TITLE | Change Addition |
| NAME | 1722 SOUTHEAST 44TH TERRACE | 1.2 NAME | 800002262468-0 |
| STREET ADDRESS | CAPE CORAL FL 33904 | 1.3 STREET ADDRESS | -08/08/97-01142-020 |
| CITY-ST-ZIP | | 1.4 CITY-ST-ZIP | ****165.00 ****165.00 |
| TITLE | SD HEIDLOFF, PETER | 2.1 TITLE | Change Addition |
| NAME | 1722 SOUTHEAST 44TH TERRACE | 2.2 NAME | |
| STREET ADDRESS | CAPE CORAL FL 33904 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | Change Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | Change Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | Change Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | Change Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do 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 oath; that I am an officer or director of the corporation or 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 on an attachment with an address.

CR2E034 (4/97)

8-7-97

7-19-97

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Rainer & Birgitt Dagge

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Estero Florida 33928 USA

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Telefax (941) 495 6417
E-Mail dagge@peganet.com
B R D 01149 2304 82328

29. Juli 1997

Dear ladies and gentlemen,

I am wirting to you on behlaf of my friend Mr. Peter Heidloff, who is a SD of the White Eagle of South Florida Inc..

Mr. Heidloff speaks only very little english, so he asked me to answer for him, besides that he returned to germany a few days ago.

He got your Corporation Annual Report, 2 nd Notice, last week, he never received the first notice.

For that reason we kindly ask you to wave the penalty of 385,00 US \$ late fee.

When I called in under 904 488 9000 they told me to send this letter plus a 165,00 US \$ Check in : I hope I did everythings correct.

If there is any mistakes or questions, please be so kind and write me, so I can forward the information directly to Mr. Heidloff.

Thank oyu very much for your help.

Best regards

 Birgitt Dagge