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 # P96000099830 (7)

SCHLEPPER BOY, INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Place of Business Maili	ng Address		1 (684) 418 (815) 615) 64(1)	DANK DOMO 18416 18161 IDRAE 1911 3011 1001	
	VENICE LANE				
SUITE 202 N. MAMI FL 33181 N. MAMI FL 33181			DÓ NOT WRE	TE IN THIS SPACE	
	iinaii i E oosot		3. Date Incorporated or Qualified		
			12/09/1996		
	Mailing Address		4. FEI Number 65-07	Applied For	
Suite, Apl. #, etc.	P.o. Box 18 uite, Apt. #, etc.	14	ALECT OF	Not Applicable	
27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
			6. Election Campaign Financing	\$5.00 May Be	
	Country Zip Country		Trust Fund Contribution	Added to Fees	
	3004-181430	USA	8. This corporation owes or has p	<u> </u>	
9, Name and Address of Current Register	ed Agent	10074	Personal Property Tax due Jur 10. Name and Address of New F		
WOHL, BENJAMIN		81 Name			
1777 VENICE LANE			81 Name BENTAMIN WOHL 82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 232			25 N, Flaer Address (P.O. Box Number is Not Acceptable)		
N. MIAMI FL 33181		83	7.7. 63 67 77 6		
		84 City_		Tee 1 7 . O . d .	
			WIA	FL 85 Zip Code 4	
11. Fursuant to the provisions of Sections 607,0502 and 607 office or register of agent, or both, in the State of Florida agent. I am familiar with, and accept the obligations of, S	1508, Florida Statules, the	above-named c	orporation submits this statement for the	purpose of changing its registered	
agent. I am temiter with, and accept the obligations of, S	ection 607.0505, Florida S	tatutes.	ration's board of directors. Thereby acc	epit ine appointment as registered	
SIGNATURE Signature, typed of pointed name of registered agent and title it is	Benjanin W	onl	quired when reinstating)	1/98	
12. OFFICERS AND DIRECTO			ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE D	DELETE 1.1	1 TITLE	DIP	Change	
NAME WOHL, TAMARA	1.2	2 NAME		(A V A)	
STREET ADDRESS 1777 VENICE LANE, SUITE 232	1.3	STREE1 ADDRESS	P.O. BOX 1814	(1 4/ 7)	
CITY-ST-ZIP N. MIAMI FL 33181		CITY-ST-ZIP	DANA /F1. 3300	4	
TITLE D		I TITLE	• •	Change Addition	
NAME WOHL, ELYS		NAME			
STREET ADDRESS 1777 VENICE LANE, SUITE 232 OITY-ST-ZIP N. MIAMI FL 33181		STREET ADDRESS			
TITLE D. N. MIAMI FL 33181		4 CITY-ST-ZIP	N/WCI-	Change Addition	
NAME WOHL, BENJAMIN		NAME	PIVISIT	Triange D Addition	
STREET ADDRESS 1777 VENICE LANE, SUITE 232		STREET ADDRESS	P.O. BOX 1814 N DANA, FI. 33004	/ 4/	
CITY-ST-ZIP N. MIAMI FL 33181		I. CITY-ST-ZIP	DAMA F1. 23007		
MILE		TITLE	- 1,000	Change Addition	
NAME	4.2	2 NAME		-	
STREET ADDRESS	4.3	STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ DELETE 51	TITLE		Change Addition	
NAME ,	5.2	NAME			
STREET ADDRESS	5.3	STREET ADDRESS			
City-St-Zip		CITY - ST - ZIP			
TITLE		TITLE		Change Addition	
NAME	6.2	NAME			
STREET ADDRESS	6.3	STREET ADDRESS			
CITY-ST-ZHP	6.4	CITY-ST-ZIP			

Indicated on this annual report or suppliemental annual report is frue 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.