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 # P97000

P9700002817 (9)

SUEGE, INC.

Principal Place of Business

Mailing Address

FILED Mar 20 1998 8:00am Secretary of State



4415 FLORIDA NATINAL DRIVE SUITE 113 LAKELAND FL 33813	E 113 SUITE 113		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/08/1997			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	· · · · · ·	Applied For
21 3587 Tibereye CT	26 3587 TIGO	ceu	<u>. (</u>	58-2278230		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired		5 Additional Required
City & State City & State City & State City & State			Trust Fund Contribution Added to I		00 May Be ed to Fees	
Zip Country 24 33860 25 USA	29 FL 30	Country 3	C 2082	This corporation owes or has paid the Personal Property Tax due June 30.	196	Intangible No
g. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Register	ed Agent	
WENDEL, JOHN F		81	Name			
C/O WENDEL CHRITTON & PARKS, CHARTERED 5300 & FLORIDA AVE			82 Street Address (P.O. Box Number is Not Acceptable)			
LAKELAND FL 33813		63				
•		84	City		85 Z	ip Code
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob- 	ate of Florida. Such change was auth	horized b	y the corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	e of changin appointment	g its registered as registered
SIGNATURE Signature typed or printed name of registered	agent and tille if applicable (NOTE: B	agislared Ag	ent signature requi	ired when reinstaling) DA	re	
	AND DIRECTORS	13.	an algorithm redu	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE PRESIDENT	DELETE	1.1 TITLE		7.00 HONOTO INNACED TO OFFICE IN	Chan	
NAME GEONGE R. S.	chrebel	1.2 NAME	1			
STREET ADDRESS 3587 TIGERS	NO CI.	1.3 STREET	ADDRESS			
CITY-ST-ZIP MULLIFICACY FC	33860	1.4 CITY-5	ST-ZIP			
TITLE	DELETE	2.1 TITLE			☐ Chan	ge Addition
NAME		2.2 NAME	1	•		
STREET ADDRESS		2.3 STREET	ADDRESS			
CITY-ST-ZIP		2. 4 CITY-				
TITLE	☐ DELETE	3.1 TITLE	<u> </u>		Chan	ge Addition
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET	ADDRESS			
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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 all officer or director of the corporation of the receiver or trustee employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with an address.