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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000006874 (6)

3628 SOUTH DIXIE HIGHWAY

WEST PALM BEACH FL 33405

ERHARD ENTERPRISES, INC.

3628 SOUTH DIXIE HIGHWAY 3628 SOUTH DIXIE HIGHWAY WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-01 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name ERHARD, BRUCE T 3628 SOUTH DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33405** 84 City 85 Zip Code 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 typed or pinted name of registered agest and title if applicable INO15 Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE ERHARD, BRUCE T NAME 1.2 NAME 3628 SOUTH DIXIE HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33405 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 21 TITLE Addition ERHARD, LINDA L NAME 22 NAME

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3 1 TITLE

32 NAME

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5.2 NAME 5 3 STREET ADDRESS

6.1 TITLE

6.2 NAME

CITY-ST-ZIP 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 oath; that I am an officer or director of the corporation or the receivor 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

SIGNATURE: 1

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Mar 25 1998 8:00am

Secretary of State