## 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 # P97000029515 (8)

SCHRADER ENTERPRISES, INC.

**FILED** Apr 07 1998 8:00am Secretary of State

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· ·	of Business  NIN STREET  PTA, FL 34237	Mailing Address  2198 MAIN STREI SARASOTA, FL 34		DO NOT WRITE IN THI		
US		US		3. Date Incorporated or Qualified 04/01/1997		
2. Principal Pl	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0740921	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	)	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Zip	Country 30	This corporation owes or has paid the operational Property Tax due June 30.		
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registers	d Agent	
JAE	ENSCH, P. CHRISTOPHER		81 Name			
2198 MAIN STREET SARASOTA, FL 34237			62 Street Add	ress (P.O. Box Number is Not Acceptable)		
US	· · · · · · · · · · · · · · · · · · ·					
			84 City	F	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						
	Signature typed or printed name of registered agen		Registered Agent signature requ			
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
NAME	SCHRADER, GUNTER		1.2 NAME		LLJ oldrigo LLJ radikon	
STREET ADDRESS	13 BROADMOOR ROAD		1.3 STREFT ADDRESS			
CITY-SI-ZIP	ROTUNDA WEST FL 33947		1.4 DITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		T DETELE	41 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		T Drutte	4.4 CITY-ST-ZIP		Change Addition	
TITLE		LJ DELETE	5.1 TITLE		L Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. Thereby c	ertify that the information supplied wi	th this filing does not qualify fo	r the exemption stated in	Section 119.07(3)(i), Florida Statutes, I further	certify that the information	
indicated officer or o	on this annual report or supplements	I annual report is true and acci- iver or trustee empowered to a	urate and that my signati	re shall have the same legal effect as if made juired by Chapter 607, Florida Statutes; and that	under oath; that I am an	