

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90060 013 ***150.00

DOCUMENT # P97000034209

1. Corporation Name
SCWAK INTERNATIONAL, INC.

Principal Place of Business
7110 21ST STREET EAST
SARASOTA FL 34243

Mailing Address
7110 21ST STREET EAST
SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/14/1997

4. FEI Number

65-0743979

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 1520 S. Suncoast Blvd.

Suite, Apt. #, etc.

22 City & State

23 Homosassa FL

Zip

24 34448

Country

25 Citrus

2a. Mailing Address

26 1520 S. Suncoast Blvd

Suite, Apt. #, etc.

27 City & State

28 Homosassa, FL

Zip

29 34448

Country

30 Citrus

9. Name and Address of Current Registered Agent

HERB, F STEVEN
2070 RINGLING BLVD
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME SPENCER, DONALD M
STREET ADDRESS 2180 SPARROW CT
CITY-ST-ZIP SARASOTA FL 34239

TITLE D ☐ DELETE
NAME COLLINS, MIKE
STREET ADDRESS 7110 21ST STREET EAST
CITY-ST-ZIP SARASOTA FL 34243

TITLE D ☐ DELETE
NAME ATWOOD, DON
STREET ADDRESS 7110 21ST STREET EAST
CITY-ST-ZIP SARASOTA FL 34243

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME PAPKE, HOWARD
1.3 STREET ADDRESS 1520 S. SUNCOAST BLVD.
1.4 CITY-ST-ZIP Homosassa, FL 34448

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/99
Date

352 795 4111
Daytime Phone #

CR2E034 (11/98)