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 # P97000062698 (0)

SCHLIGA, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			1 1991 1991 112 1011 10211 10111 10111 10111	
822 COSTA PLACE		822 COSTA PLACE				
LEHIGH ACRES FL 33972		LEHIGH ACRES FL 33972		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
6 Dringing! Di	ace of Business	2a. Mailing Address			07/17/1997 4. FEI Number	Applied For
	BOB OF BUSINESS				65-0776743	Not Applicable
21 Suite Ant # etc		Suite, Apt #, etc.			\$8.75 Additional	
Suite, Apt. #, etc.		 			5. Certificate of Status Desired	Fee Required
City & State		City & State		C Floation Comparing Financing	\$5.00 May Be	
23		28		6. Election Campaign Financing Trust Fund Contribution	Added to Fees	
	Zip Country		Zip Country		8. This corporation owes or has paid the curr	
	25	— ·	30		_ · · · · · · · · · · · · · · · · · ·	Yes 🖾 No
24	Name and Address of Curre		301		10. Name and Address of New Registered A	
DEI			81	Name		
PELZER, GERHARD						
817 JEFFERSON AVE.			82	Street Address (P.O. Box Number is Not Acceptable)		
LEH	IIGH ACRES FL 33936		83			
			•0			
			84	City	FL	85 Zip Code
						ah ay ging its registered
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 Statules.						
SIGNATURE						
	Signature, typed or profind name of registered ag			int signature rec	Quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
12.		NO DIRECTORS DELETE	13.	16		Change Addition
TITLE	PT AND LICENS		l l		COMID HEINZ	Citaligo rockion
NAME	SCHNID, HEINZ		1.2 NAME		SCHMID, HEINZ 822 COSTA RLACE	
STREET ADDRESS	822 COSTA PLACE		1.3 STREET	ADDRESS	LEHICH ACRES, FL 33972	
CITY-ST-ZIP	LEHIGH ACRES FL 33972	DELETE	1.4 CITY - S	T-ZIP		Change Addition
TITLE	-		2.1 TITLE	[]		UZ Gridingo
NAME	SCHNID, HEIDY		2.2 NAME		SCHMID, HEIDY 822 COSTA PLACE	
STREET ADDRESS	822 COSTA PLACE		2.3 STREET	ADDRESS	822 COS M FUIL 2207	,
CITY-ST-ZIP	LEHIGH ACRES FL 33972		2. 4 CITY -	ST-ZIP	LEHIGH ACRES, FL 3397	Change Addition
TITLE		☐ DELETE	3.1 TITLE	سا	S	Change 🔼 Addition
NAME			3.2 NAME	Ĭ I	Petra Gasser 822 Costaplace	
STREET ADDRESS			3.3 STREET			_
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	LEHIGH ACRES, FL 3397	
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME		·	
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		DELETE	61 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S			
14. I hereby o	certify that the information supplied	with this filing does not qualify fo	or the exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further ce	rtify 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.

4/73/01

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