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May 05, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P97000093394

1. Corporation Name ASSMANN FLORIDA INTERNATIONAL, INC.

Principal Place of Business: G/O DON MORGAN, 1500 ROYAL PALM SQUARE BLVD., SUITE 101, FORT MYERS FL 33919-1058
Mailing Address: G/O DON MORGAN, 1500 ROYAL PALM SQUARE BLVD., SUITE 101, FORT MYERS FL 33919-1068



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/30/1997
4. FEI Number: 59-3500202
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: No

9. Name and Address of Current Registered Agent: BATCHELDER, DRAKE M. ESQ., TRIPP, SCOTT, CONKLIN & SMITH, 110 SE 6TH STREET, 15TH FLOOR, FORT LAUDERDALE FL 33301
10. Name and Address of New Registered Agent: 81 Name: Truxton, Gregg S., 82 Street Address: 2121 Ponce de Leon Blvd., 83 Suite 600, 84 City: Coral Gables, FL 85 Zip Code: 33134

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.

12. OFFICERS AND DIRECTORS: PSD HENNING, BRIDGETE, AM KUCKUCKSBERG 15, D 22952 LUTJENSEE GE
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 1.1 TITLE: Change, 1.2 NAME: Henning, Brigitte, 1.3 STREET ADDRESS: AM Kuckucksberg 16

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: Brigitte Henning, Date: 4/27/99, Daytime Phone #: (954) 731-0666

CR2E034 (11/98)