2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000028419

Entity Name: SCHWENK CORPORATION

FILED Apr 18, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
795 FALLING WATER ROAD WESTON, FL 33326				1740 NE 2ND AVENUE FORT LAUDERDALE, FL 33305			
Current Mailing Address:				New Mailing Address:			
795 FALLING WATER ROAD WESTON, FL 33326				1740 NE 2ND AVENUE FORT LAUDERDALE, FL 33305			
FEI Number: (65-0824843	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desir	red()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PIQUIN, BRUNO R 795 FALLING WATER ROAD WESTON, FL 33326				OGLE, BRYAN S 1740 NE 2ND AVENUE FORT LAUDERDALE, FL 33305			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.							
SIGNATURE: BRYAN S. OGLE				04/18/2002			
	Electronic	Signature of Registered Agent	t			Date	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).							
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address:	PCD (X) E PIQUIN, BRUNO I 795 FALLING WA	Delete R KTER ROAD		Title: Name: Address:		Change () Addition	
City-St-Zip:	WESTON, FL 33	326		City-St-Zip:			
Title: Name: Address: City-St-Zip:	TD () C SCHWENK, TRAC 1740 NE 2ND AVI FORT LAUDERDA	ENUE		Title: Name: Address: City-St-Zip:	CTD (X) SCHWENK, TRA 1740 NE 2ND AV FORT LAUDERE	/ENUE	
Title: Name: Address: City-St-Zip:	SD () C OGLE, BRYAN S 1740 NE 2ND AV FORT LAUDERD			Title: Name: Address: City-St-Zip:	PSD (X) OGLE, BRYAN S 1740 NE 2ND AV FORT LAUDERD	/ENUE	
Title: Name: Address: City-St-Zip:	D () E SERGI, DIANA 20304 99TH AVE SNOHOMISH, WA			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () C MARTIN, WILLIAN 116 GRAND PAVI ISLE OF PALMS,	LION		Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRYAN S. OGLE P 04/18/2002