

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Sep 10, 1999 8:00 am  
Secretary of State  
09-10-1999 90012 011 \*\*\*550.00

DOCUMENT # P98000089985

Corporation Name

ENGELHARDT BUSINESS SERVICES, INC.

614362 - 90012 - 11



Principal Place of Business

35 MICHIGAN AVENUE  
FORT MYERS FL 33916

Mailing Address

2635 MICHIGAN AVENUE  
FORT MYERS FL 33916

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1998

4. FEI Number

65-0888712

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

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



Yes No

Principal Place of Business

15870 SANCTUARY DR.

Suite, Apt. #, etc.

2a. Mailing Address

26 15870 SANCTUARY DR.

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33647

Country

25 USA

City & State

28 TAMPA, FL

Zip

29 33647

Country

30 USA

9. Name and Address of Current Registered Agent

ENGELHARDT, PAT F  
2635 MICHIGAN AVENUE  
FORT MYERS FL 33916

10. Name and Address of New Registered Agent

81 Name

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

15870 SANCTUARY DRIVE

83

84 City TAMPA

FL

85 Zip Code 33647

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

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	PSD	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	ENGELHARDT, PAT F		1.2 NAME	
ST-ZIP	2635 MICHIGAN AVENUE		1.3 STREET ADDRESS	15870 SANCTUARY DRIVE
	FORT MYERS FL 33916		1.4 CITY-ST-ZIP	TAMPA, FL 33647
NAME		<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			2.2 NAME	
ST-ZIP			2.3 STREET ADDRESS	
			2.4 CITY-ST-ZIP	
NAME		<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			3.2 NAME	
ST-ZIP			3.3 STREET ADDRESS	
			3.4 CITY-ST-ZIP	
NAME		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			4.2 NAME	
ST-ZIP			4.3 STREET ADDRESS	
			4.4 CITY-ST-ZIP	
NAME		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			5.2 NAME	
ST-ZIP			5.3 STREET ADDRESS	
			5.4 CITY-ST-ZIP	
NAME		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			6.2 NAME	
ST-ZIP			6.3 STREET ADDRESS	
			6.4 CITY-ST-ZIP	

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.

SIGNATURE: Pat F. Engelhardt

September 7, 1999 813-971-7667

CR2E034 (5/99)