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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$38840

(2)

HOWARD J. SCHUMACHER, P.A.

FILED May 07 1998 8:00am Secretary of State



B 1 1 10							417 BIBII BIBII BIB		
Principal Place of Business Mailing Address									
1 E. BROWA	RD BLVD.	1 E. BROWARD BLV).						
700 FT. LAUDERDALE FL 33301		700 FT. LAUDERDALE FL 33301				DO NOT WRITE IN THIS SPACE			
The Charles	DALE I L WOOD	THE ENDERDREE TE SOOT				3. Date Incorporated or Qualified			
						03/14/1991			
2. Principat P	face of Business	2a. Mailing Address				4. FEI Number	- I Ar	oplied For	
21		26				65-0249603			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					— \$9.75 Additional		
22		27				5. Certificate of Status Desired	7	equired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	
23		26				Trust Fund Contribution		to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid the co	urrent year In	tangible	
24	25	29	30	30		Personal Properly Tax due June 30. Yes No			
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered	J Agent		
SC	CHUMACHER, HOWARD			81	Name				
IE	. Broward Blvd.		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)			
SU	IIT E 700		62 SHEEL AC			datess (F.O. Dex Hamber is Not Neceptable)			
FT	. LAUDERDALE FL 33301			83					
					0:1:-			01-	
				В4	City	FI	L 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									
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. Lam familiar with, and accept the obliquations of, Section 607.0505, Florida Statules.									
SIGNATURE Signature, typied or printed name of registered agent and site if applicable (NOTE: Registered Agent signature recuired when reinstating) DATE.									
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12	
TITLE				11.6	Ţ	\mathbf{D}_{\cdot}	Change	Addition	
NAME	SCHUMACHER, HOWARD J.		1.2 N/	1.2 NAME		Schumaler, Kong	,		
STREET ADDRESS 1 E. BROWARD BLVD., SUITE		E 700	1.3 S1	IREET A	DDRESS	IE. Browged glog ST	700		
CITY-ST-ZIP FT. LAUDERALE FL 33301			1.4 DI	TY-ST	- ZIP	t. Cangladorlo FC	333	70	
TITLE		☐ DELETE	2.1 10	1LE			☐ Change	Addition	
NAME			2.2 N/	AME					
STREET ADDRESS			2.3 S1	TREET A	ODRESS				
CITY-\$T-ZIP			2.4 C	ITY-ST	-ZIP				
TITLE	DELETE 3			1L F			Change	Addition	
NAME			3.2 N/	AME					
STREET ADDRESS			3.3 \$1	REET A	DDRESS				
CITY-\$T-ZIP			3.4. C	ITY - ST	- 21P				
TITLE		☐ DELETE	4.1 10	116			Change	Addition	
NAME			4.2 N	AME	1				
STREET ADDRESS			4.3 ST	IREE1 A	DDRESS				
CITY-ST-ZIP			4.4 CI	ty-st	- 7(P				
TITLE		☐ DELETE	5.1 Ti	116	T		Change	Addition	
NAME			5.2 N/	AME.		50000252109 -05/13/980100300	d C		
STREET ADDRESS			5 3 51	REET A	DDRESS	-05/13/980100300) 5	ļ	
CITY-ST-ZIP			5.4 CI	TY-St	ZIP	***150.00			
TITLE		DELETE	61 TF				Change	Addition	
NAME			62 N/	4ME			∨	\^	
STREET ADDRESS			63 S1	REET A	DDRESS		}	6/1	
City-ST-ZIP				TY-ST			٧	' N'	

4. Thereby 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 of 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 of the receiver of the receiver or trustee.

CICNATURE

4-79-9

(90-11)366-0477