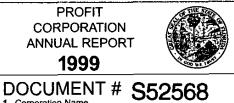
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name F.L.E. II, INC.



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 19, 1999 8:00 am Secretary of State **Katherine Harris**

04-19-1999 90058 020 ***150.00



Address	

				_				
Principal Place	of Business	Mailing Address				** **** ***** ***	6:6: 6:4:	ord11 91911 (#81
3616 WEBBER ST SARASOTA FL 34232 SARASOTA FL 34232					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed	_		
					05/13/1991			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
·	INIEBBER ST	26 3618 WEBBO	ER.	57	65-0262101		N	lot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional _
22 1/2	_	27 //2		_	5. Certificate of Status Desired		Fee R	Required
City & State		City & State			6. Election Campaign Financing		\$5.00) мау Ве
23 SARA	SOTA IFL	28 SARASOTA,	PL	<u> </u>	Trust Fund Contribution		Added	I to Fees
Zip	Country	Zip	Countr		8. This corporation owes the curre			
24 342	32 25 DARASOTA	29 54232 30	174	RASON	Personal Property Tax.		∐ Yes	□No
	9. Name and Address of Current	Registered Agent		·	10. Name and Address of New R	egistered A	gent	
	FI C EDEDEDION ! "		8	Name				
	ELS, FREDERICK L., II		8	Street Addre	ss (P.O. Box Number is Not Accepta	ble) .		
	WEBBER ST			<u> </u>				
SAH	ASOTA FL 34232		8:	3				
			8	City			85 Zip	Code
				1		<u> </u>		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	' Florida. Such change was auth	orized b	/ the corporation	ration submits this statement for the parties board of directors. I hereby accep	purpose of c t the appoint	hanging it ment as r	s registered egistered
SIGNATURE		NOTE D		ent signature required	when minetating)	DATE		\
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	ant signature reduited	ADDITIONS/CHANGES TO OFF		DIRECT	ORS IN 12
TITLE	D	DELETE	1.1 MTLE	1			☐ Change	
NAME	ENGELS, FREDERICK L., II	<u> </u>	1.2 NAME					1
1	3616 WEBBER ST		-	T ADDRESS				
STREET ADDRESS	SARASOTA FL		1.4 CITY-	ļ				}
CITY-ST-ZIP TITLE	OAHAOOTATE	☐ DELETE	2.1 TITLE			_	Change	Addition
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				ET ADDRESS				}
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			3.4. CITY-					}
CITY-ST-ZIP		DELETE	4.1 TITLE			_	☐ Change	Addition
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<u> </u>				ET ADDRESS]
STREET ADORESS	_		4.3 STRE					
CITY-ST-ZIP TITLE			5.1 TITLE		-		Change	Addition
NA. 14			5.2 NAME	1			_ ,	_
NAME	· M			ET ADDRESS				
STREET ADORESS	•		5.4 CITY-	Y				ነ
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE				Change	Addition
			6.2 NAME				3	_
NAME		ļ		ET ADDRESS				İ
STREET ADDRESS			6.4 CITY-	1				
CITY-ST-ZIP			0.4 CH11-	01-AF				

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 of an ap attacpment with an address, with all other like empowered.

SIGNATURE

:R2E034 (11/98)