SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

V16499

(8)

PAUL STICHTER ENTERPRISES, INC.

FILED Aug 26 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		
12300 N.W. 26TH STREET	12300 N.W. 26TH STREET		
PLANTATION FL 33323	PLANTATION FL 33323		
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Bysiness	2s. Mailing Address		02/24/1992 4. FEI Number Applied For
21 /1039 NW 9 CT	26 //039 /VV	V 9 CT	T T T T T T T T T T T T T T T T T T T
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	V 1 U	65-0335468 Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City, & State	City & State	EI	6. Election Campaign Financing \$5.00 May Be
23 PLANTATION FL	28 PLANTATION	TL	Trust Fund Contribution Added to Fees
Zip Country 25 1/5 4	Zip	Country	8. This corporation owes or has paid the current year Intangible
To To To To To To To To		30 USA	Personal Property Tax due June 30. Yes No
9. Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New Registered Agent
SHOTIEN, FAUL			
12300 N.W. 261H SINCE 82 Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33323			
		83	
		84 City	85 Zip Code
			LANTATION FL 33324
11. Pursuant to the provisions of sections 607.0502 a	ind 607.1508, Florida Statutes Florida, Such change was ai	s, the above-named could be corrected by the corre	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. am familia with and accept the obligation	ons of, section 607.0505, Flor	rida Statutes.	1 1.
SIGNATURE 1AU	IL STICHTER		7/3/98
Shanature, typed or printed name of registered egent at 12. OFFICERS AND		TE: Registered Agent signature 13.	
TITLE PC		1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PC. Change Addition
NAME STICHTER, PAUL	L DELETE	1.2 NAME	
STREET ADDRESS 12300 N.W. 26 ST.			PAUL STICHTER 11039 NW 9 CT
NI ALTERNAL FL GOAGO			
TITLE VP	Masiere	1.4 CITY-ST-ZIP 2.1 TITLE	
NAME STICHTER, JUDY	DELETE	22 NAME	L Change Addition
STREET ADDRESS 12300 N.W. 26 ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP PLANTATION FL 33323		2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	
NAME	L VELETE	3.2 NAME	Change Addition
STREET ADDRESS		3.3 STREET ADDRESS	
CiTY-ST-ZIP		3.4 City-ST-ZIP	•
TITLE	DELETE	4.1 TITLE	
NAME	□ DEFE IF	4.2 NAME	Change Addition
STREET ADDRESS		4.3 STREET ADDRESS	1
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Comment of the second s
NAME	L_J DELETE	5.2 NAME	Change Addition
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Channe Addition
NAME	CT DETEIG	6.2 NAME	Change Addition
STREET ADDRESS		6.3 STREET ADDRESS	İ
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
	is filing does not qualify for the		section 119.07(3)(i), Florida Statutes. I further certify that the information

4. 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 approach or 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 in chapter or on an attachment with an address.

alalas

ballow Only