

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **F87729 (2)**
1. Corporation Name
SHUTTER SOURCE INTERNATIONAL, INC.



Principal Place of Business Mailing Address
211 NW 5TH AVENUE HALLANDALE FL 33009

3. Date Incorporated or Qualified **06/18/1982** 3a. Date of Last Report **04/11/1995**
4. FEI Number **NOT APPLICABLE** 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**SHAHADY, THOMAS R.
HOUSTON & SHAHADY, P.A.
100 N.E. 3RD AVE., STE. 850
FT. LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent
81 Name **FLOYD PEARSON RICHMAN GREER WEIL, et al, P.A.**
82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI CENTER, TENTH FLOOR**
83 **201 S. BISCAYNE BLVD.**
84 City **MIAMI** FL 85 Zip Code **33131**

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 (the board) and the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE **CHARLES JOHNSON, Vice-Pres. of Floyd Pearson, et al** (DATE) **4/26/96**

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1. DELETE
**PD WRONO, WALTER A.
211 N.W. 5TH AVE.
HALLANDALE FL**
2. DELETE
**SDT WRONO, SHARON
211 N.W. 5TH AVE.
HALLANDALE FL**
3. DELETE
**D WRONO, HELEN
211 N.W. 5TH AVE.
HALLANDALE FL**
4. DELETE
**D MCPHEE, BRUCE
211 N.W. 5TH AVE.
HALLANDALE FL**
5. DELETE
6. DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. 1. TITLE Change Addition
2. 2. NAME
3. 3. STREET ADDRESS
4. 4. CITY-ST-ZIP
**PRESIDENT/DIRECTOR WRONO, SHARON
211 N.W. 5TH AVE.
HALLANDALE, FL** Change Addition
5. 5. 1. TITLE Change Addition
6. 6. 2. NAME
7. 7. 3. STREET ADDRESS
8. 8. 4. CITY-ST-ZIP
**SECRETARY/TREASURER/D WRONO, HELEN
211 N.W. 5TH AVE.
HALLANDALE, FL** Change Addition
9. 9. 1. TITLE Change Addition
10. 10. 2. NAME
11. 11. 3. STREET ADDRESS
12. 12. 4. CITY-ST-ZIP
**100001857941
-06/11/96--01073--008
***200.00**
13. 13. 1. TITLE Change Addition
14. 14. 2. NAME
15. 15. 3. STREET ADDRESS
16. 16. 4. CITY-ST-ZIP
**DIRECTOR VERDON, LARRY
211 N.W. 5TH AVE.
HALLANDALE, FL** Change Addition
17. 17. 1. TITLE Change Addition
18. 18. 2. NAME
19. 19. 3. STREET ADDRESS
20. 20. 4. CITY-ST-ZIP
**DIRECTOR DeGRASSE, JAMES
211 N.W. 5TH AVE.
HALLANDALE, FL** Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 **Sharon Wrono** SHARON WRONO (DATE) **4/26/96** (954) 456-6979
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)