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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P960000 52305 (5)

Work Out Wear Shep, Inc.

May 13, 1999 8:00 am Secretary of State

05-13-1999 90004 030 ***150.00

				_		1			
Principal Place	e of Business	Mailing Address	_]			
6906 Barry Road 6906 Barry Road Tampa, Fla. 33634 Tampa, Fla. 33634									
	, Fla. 33634	Jama Fla	Tanua Fla. 33634-2916			DO NOT WRIT	E IN THIS	SPACE	
) adopte	, r (a. 5505)	۱۰ اومکار در		_		3. Date Incorporated or Qualifed 06/19/1996			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		├ ─- ├ -	Applied For
21		26				59-3393826			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional Required
City & Stat	<u> </u>	City & State				6: Election Campaign Financing			0 May Be
23		28			-	Trust Fund Contribution			d to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the curre	ent year Inta	angible.	
24	25	29	30			Personal Property Tax.		Z Yes	□ ₩o
	9. Name and Address of Curr					10. Name and Address of New R	egistered /	Agent	
10-	mitchell	Jc		81	Name				
Kar	705, 11 11 Chen	1		82	Street Addre	ss (P.O. Box Number is Not Accepta	błe)		
690	06 Barry Koao			83					
Ta	nos, Mitchell 06 Barry Road mpa, Fla. 336	34		03					
• •	.,4- ,			84	City		FL	85 Zij	p Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Stat	utes, the al	oove	-named corpo	ration submits this statement for the		changing	its registered
office or r	egistered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change was	authorized	by t	the corporation	n's board of directors. I hereby accep	t the appoin	itment as	registered
SIGNATURE			TE B				DATE		
12.	Signature, typed or printed name of registered a	AND DIRECTORS	13.	ryen	signature required	ADDITIONS/CHANGES TO OF		D DIREC	TORS IN 12
TITLE	Dresident	□ DELETE	1.1 TIT	LE.				Chang	
NAME	Mitchell Ramos	3 r.	1.2 NA	ME					
STREET ADDRESS	6906 Barry Road)	1.3 ST	REET.	ADDRESS				
CITY-ST-ZIP	Tampa, Fla 33	634	1.4 Ci1	ry-st	-ZIP				
TITLE	Vice-President	☐ DELETE	2.1 TIT				-	Chang	e
NAME	Baker, Andrew	A Jr.	2.2 NA	ME					
STREET ADDRESS		ŝ + .	2.3 ST	REET.	ADDRESS				
CITY-ST-ZIP -	Tampa, Fla. 336		2.4 CI	TY-ST	r-ZIP				
TITLE	Secretary-Tree	SUPER DELETE	3,1 TIT	LE.				Chang	e - 🗀 Additio
NAME	Ramos, Sandy &		3.2 NA	ME					
STREET ADDRESS	6906 Barry Road	,	3.3 ST	REET.	ADDRESS				
CITY-ST-ZIP	Tampa Fla. 336.	34	3.4. CI	TY-ST	r-ZiP				
TITLE		☐ DELETE	4.1 TIT	LΕ				Chang	e
NAME			4. 2 N/	ME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP				
TITLE		☐ DELETE	5.1 T/T	LE				Change	e Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET,	ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-ST	. ZIP				
TITLE		☐ DELETE	6.1 TIT	LE				Change	e
NAME			6.2 NA	ME	\				
STREET ADDRESS			6.3 STI	REET	ADDRESS				
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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, or on an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (11/98)