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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mor dam

Socretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 675648

(0)

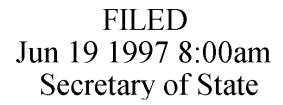
SHORTY'S INC.

Principal Place of Business

9150 8 W 87TH AVENUE #205 MIAMI FL 33176

Mailing Address

9150 8 W 87TH AVENUE #205 MIAMI FL 33176-2384





				06/09/1980	04/01/1996	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	4	26		59-2008906	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Bo Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for		
24	25	29	30		Yes No	
	9. Name and Address of Current	t Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
780 N.W. LEJEUNE RD., STE. 312						
MIAMI FL 33126				83		
4			63			
) ,0			84 City		FL 85 Zip Code	
11. Pursuant to	to the provisions of Sections 607.0502 ogisterod agent, or both, in the State	2 and 607.1508, Florida Statu of Florida, Such change was	iles, the above-named of authorized by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered	
agent. Lai SIGNATURE	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes.			
	Signature, typod or printed name of registered ager	nt and title d applicable (NC	It: Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	P	DELETE	1.1 TITLE		Change Addition	
NAME	HOUSEN, CHARLES		1.2 NAME			
STREET ADDRESS	9150 S W 87 AVE #205		1.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI, FL 33176		1.4 CITY - ST - 7IP			
TITLE	V	☐ DELETE	2 1 TITLE		Change Addition	
NAME	VAN GHEEM, KENNETH		2.2 NAME			
STREET ADDRESS	9150 S W 87 AVE #205		23 STREET ADDRESS			
CITY ST-ZIP	MIAMI, FL 33176		2. 4 C(TY - ST - Z(P			
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition	
NAME	GREENFIELD, ALAN		3.2 NAME			
STREET ADDRESS	780 NW LEJEUEN RD #312		3 3 STREET ADDRESS			
CITY-\$1-ZIP	MIAMI, FL 33176		3.4 CITY-S1-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition	
NAME	SACH, KARL		4. 2 NAME			
STREET ADDRESS	3675 SW 24 ST.		4.3 STREET ADDRESS			
CITY-ST-ZIP	Miami, FL 33176		4.4 CITY - ST - ZIP			
TITLE	D	DELLTE	5.1 TITLE		Change Addition	
NAME	FOCARACCI, RALPH		5.2 NAME			
STREET ADDRESS	3675 SW 24 ST.		5.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	· ·	5.4 City-St-ZiP			
TITLE	81	☐ DELET E	6.1 THLE		Change Addition	
NAME	WALLINS, SANFORD		6.2 NAME			
STREET ADDRESS	9150 SW 87 AVENUE #205		6.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		6.4 CITY - ST - ZIP			
		with this filing does not qua		aled in Section 119.07(3)(i), Florida Statule	s. 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.

6/17/97 305/595-1622