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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000086807

1. Corporation Name

SHANTERI MARKETING, INC.

Principal Place of Business	Mailing Address
1244 THOMASVILLE CIRCLE	1244 Thomasville Circle
LAKELAND FL 33811	Lakeland FL 33811

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90087 041 ***150.00



Principal Place	e of Business	Mailing Address			·
1244 THOMASV		1244 THOMASVILLE CIR	CLE		
LAKELAND FL	33811	LAKELAND FL 33811			DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualifed
					10/08/1998
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
·	7 Seville BLVD	26 2717 5	eville 6	3LVD	59-353-6110 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
		014. 8 01-4-			6. Election Campaign Financing 55.00 May Be
23 Cle	varwater, FC	28 Clearwo	iter F	1	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou		8. This corporation owes the current year Intangible
Zip 24 337	64 25 U.S.	29 33764	30 0	t. <i>5.</i>	Personal Property Tax. Yes PNo
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Registered Agent
KEDI	NS, SHANNON D			81 Name	KERNS, SHANNON D.
	THOMASVILLE CIRCLE			82 Street	t Address (P.O. Box Number is Not Acceptable)
	ELAND FL 33811			83	
UNIVE	- DAND 1 E 300 11			03	10%。14条件总量4%的信息的信息的10%的10%的10%的10%。
				84 City	Clearwater FL FL 85 Zip Code 33764
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida Sta	tutes, the al		d corporation submits this etatement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized	by the corpo	proporation's board of directors. I hereby accept the appointment as registered
	SHANNON D. K		111	(م	2/12/99
SIGNATURE	Signature, typed or printed name of registered age		OTE. Registered	Agent signature r	e required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 717	LE	D, P
NAME	KERNS, SHANNON D		1.2 NA	ME	KERNS, SHANNON D
STREET ADDRESS	1244 THOMASVILLE CIRCLE		1.3 ST	REET ADDRESS	s 2717 Seville Be 23764
CITY-ST-ZIP	LAKELAND FL 33811		1 4 CI	Y-ST-ZIP	KERNS, SHANNON D 2717 Seville BLVD #11205 Clearwater FL 33764
TITLE		☐ DELETE	2.1 TIT		☐ Change ☐ Addition
NAME			2.2 NA	ME	
STREET ADDRESS			2.3 ST	REET ADDRESS	S
CITY-ST-ZIP			2.4 C	TY-ST-ZIP	
TITLE		☐ DELETE	3.1 TI		☐ Change ☐ Addition
NAME			32 NA	ME	
STREET ADDRESS			3.3 ST	REET ADDRESS	s
CITY-ST-ZIP			34 C	TY-ST-ZIP	
TITLE		☐ DELETE	4.1 79		Change Addition
NAME			4. 2 N	WE	
STREET ADDRESS				REET ADDRESS	s
CITY-ST-ZIP				Y-ST-ZIP	
TITLE	-	☐ DELETE	5.1 TI		Change Addition
NAME			5.2 N		
STREET ADDRESS			5.3 ST	REET ADDRESS	s
				TY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TT		☐ Change ☐ Addition
			6.2 NA	ME	
NAME STREET ADDRESS				REET ADDRESS	s
alikee LADUKESS I					· .

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 or an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

727 793,9898