

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000002926

**Entity Name:** SHARK TOOTH GUITARS INC.

**Current Principal Place of Business:**

5113 SHARON TERRACE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

5800 BEACH BLVD.  
SUITE 203-231  
JACKSONVILLE, FL 32207

**FEI Number:** 80-0527751

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SCHMIDT, ROBERT J  
5113 SHARON TERRACE  
JACKSONVILLE, FL 32207 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SCHMIDT, ROBERT J  
Address 5113 SHARON TERRACE  
City-State-Zip: JACKSONVILLE FL 32207

Title S/T  
Name SCHMIDT, MARY J  
Address 5113 SHARON TERRACE  
City-State-Zip: JACKSONVILLE FL 32207

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT J. SCHMIDT

**PRESIDENT**

**03/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date