PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 506043

SHARP PROPERTIES, INC.

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90209 048 ***158.75



Principal Place	e of Business	Mailing Address					11811 6191 1 61611) G(G () G(G)) 1001	
3805 FISHING T SARASOTA FL		4987 WINDSOR PARK SARASOTA FL 34235	SARASOTA FL 34235			DO NOT WRITE IN THIS SPACE			
US US						3. Date Incorporated or Qualified			
						06/28/1976			
2 Principal P	face of Business /	2a. Mailing Address				4. FEI Number		Applied For	1
2. Principal Place of Business 21 4987 WindSOR Park 2a. Mailing Address 22 2a. Mailing Address 26 2a. Mailing Address						59-2826300			
Suite, Apt. #, etc. Suite, Apt. #, etc.						_/	\$8.75	Additional	
27						5. Certifcate of Status Desired	Fee R	Required	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23 Sarasota, FL 28						Trust Fund Contribution Added to Fees			
Zip Country Zip			Country			8. This corporation owes the current year Intangible			
24 34 a	55 ₂₅ US	29 30	<u>L.,</u>			Personal Property Tax.	□Yes	₩No	┨
	9. Name and Address of	Current Registered Agent		04 11		10. Name and Address of New Registered	Agent		┨
MINT	TA MADIANI			81 Name		(Same-Address ch	ange	only)	ļ
NIKITA, MARIAN				82 Street	\ddre:	ss (P.O. Box Number is Not Acceptable)	0	0 /	Ī
3805 FISHING TRAIL SARASOTA FL 34235				7/5	>	S. Palm # 504			┨
SAR	4301A FL 34233			83		•			
			į	84 CityO		.) _ =	85 Zip	Code	1
				<u> </u>	<u>ar</u>	asota Fl		1230	-
11. Pursuant	to the provisions of Sections (607.0502 and 607.1508, Florida Statutes, e State of Florida. Such change was auth	the ab orized	ove-named of by the corpo	corpor	ration submits this statement for the purpose of a board of directors. I hereby accept the appo	i cnanging ii intment as r	is registered registered	{
agent. I a	m familiar with, and accept th	e obligations of, Section 607.0505, Florida	Statu	ites.		,			
SIGNATURE						when reinstating) DATE			
12	Signature, typed or printed name of regis	ERS AND DIRECTORS	13.	Agent signature re	quirea	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	13
12.	DVP	DELETE	1.1 TIT	LE	'n	RESIDENT - DIRECTOR			1 :
NAME	SHARP, LEMUEL I	_	1.2 NA	ŀ	1	harp, LEMUEL I			;
STREET ADDRESS	4987 WINDSOR PARK			REET ADDRESS	3	ASO WALLOSOP PARK			13
CITY-ST-ZIP	SARASOTA FL			Y-ST-ZIP	4	APASOTA FL 342	.35		3
TITLE	PSD	☐ DELETE	2.1 TIT		7	987 WINDSOR PARK BARASOTA, FL 342 DIRECTOR -VICE PRE	5 Change	Addition	(
NAME	NIKITA, MARIAN		2.2 NA	ME		NIKITA MAR	IAN		
STREET ADDRESS	3804 FISHING TRAIL		2.3 S∏	REET ADDRESS	-	NIKITA, MAR	•		
CITY-ST-ZIP	SARASOTA FL		2.4 CI	TY-ŞT-ZIP			4231	D	
TITLE	ON WOOTH CE	☐ DELETE	3 1 TT	-			Change		1
NAME			3.2 NA	ME					1
STREET ADDRESS			3.3 ST	REET ADDRESS					
CITY-ST-ZIP			3.4. CF	TY-ST-ZIP					
TITLE		☐ DELETE	4.1 TIT	LE			Change	Addition	
NAME			4. 2 NA	WE					
STREET ADDRESS			4.3 STI	REET ADDRESS					
CITY-ST-ZIP			4 4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	5.1 TIT	ιE			☐ Change	e Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 STI	REET ADDRESS					1
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP					1
TITLE		☐ DELETE	6.1 TIT	LE			☐ Change	Addition	
NAME			6.2 NA	ME					
STREET ADDRESS		į	6.3 STI	REET ADDRESS					
l	1		64 CIT	rv. et. 710					1

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.

SIGNATURE: