## 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 # 826214 1. Corporation Name

Principal Place	SH & NEWCASTLE IMPORT		U.									
•			DE HARO ST									
444 DE HARO ST												
SAN FRANCISCO CA 94107			SAN FRANCISCO CA 94107					DO NOT WRITE IN THIS SPACE				
US		US					3. Date Incorporated or Qualifed 05/25/1971 ·					
2 Oringinal Pl	ace of Business	2a.	Mailing Address				4. F	El Number			Applic	ed For
	ace of Dustriess	26	, <b>.</b>				(	95-2237897			Not A	pplicable
Suite, Apt.	# etc		Suite, Apt. #, etc.					\$8.75 Additional				
22	n, 515.	27	27				5. (	Jernicale of Status Desired		Fe	e Requ	ired
City & State			City & State				6. E	Election Campaign Financing			00 м	
23			28				[ <u> </u>	Frust Fund Contribution		Ad	fed to I	ees
Zip Country			Zip Country			8. 7	This corporation owes the curr			_	<b>.</b>	
24	25	29		30				Personal Property Tax.		☐ Yes		]No
24	9. Name and Address of Currer	nt Regist	ered Agent	·			10.	Name and Address of New I	Registered A	gent		
	<del></del>				81	Name						
CT CORPORATION SYSTEM			ŀ	82 Street Address (P.O. Box Number is Not Acceptable)				able)			-	
1200 S. PINE ISLAND ROAD					~	Duotin	iddi 000 (i		<u> </u>			
PLANTATION FL 33324				ļ	83							}
										85	Zip Co	de
					84	City			FL		•	
office or reagent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	ations of,	Section 607.0505, Fk	orida Statu	utes.	, inc dorpo			pt the appoir	tment	as regis	itered
0.0,0.0	Signature, typed or printed name of registered age				Agent	t signature re	quired when rei	DDITIONS/CHANGES TO OF		DDIRE	CTOR	S IN 12
12.	OFFICERS A	ND DIREC	DELETE	13.				DDITIONS/CHANGES TO GE		Cha	inge	Addition
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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.

SIGNATURE:

5 moodie 3/29/99 (415) 265-4555

Apr 02, 1999 8:00 am Secretary of State

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