

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

MAY -1 11:11:10

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # F31589

(7)

SHED KING CORPORATION

Principal Place of Business

Mailing Address

**% ED HALEY
3898 S. STATE RD #7
MIRAMAR FL 33023**

**% ED HALEY
3898 S. STATE RD #7
MIRAMAR FL 33023**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/02/1981	3a. Date of Last Report 08/09/1994
4. FEI Number 59-2131119	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. # etc.	26 State, Apt. # etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HALEY, ED
1463 SUSSEX DR.
N. LAUDERDALE FL 33068**

B1 Name	B5 Zip Code
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	

FL

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0503, Florida Statutes.

SIGNATURE

Ed Haley

4/28/95

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.1	NAME	DP	13.1	NAME	☐ Change ☐ Addition
12.2	STREET ADDRESS	HALEY, EDWIN	13.2	STREET ADDRESS	
12.3	CITY, ST, ZIP	3898 S. STATE ROAD #7 MIRAMAR FL	13.3	CITY, ST, ZIP	
12.4	NAME	ST	13.4	NAME	☐ Change ☐ Addition
12.5	STREET ADDRESS	HALEY, MELODIE	13.5	STREET ADDRESS	
12.6	CITY, ST, ZIP	3898 S. STATE ROAD #7 MIRAMAR FL	13.6	CITY, ST, ZIP	
12.7	NAME		13.7	NAME	☐ Change ☐ Addition
12.8	STREET ADDRESS		13.8	STREET ADDRESS	
12.9	CITY, ST, ZIP		13.9	CITY, ST, ZIP	
12.10	NAME		13.10	NAME	☐ Change ☐ Addition
12.11	STREET ADDRESS		13.11	STREET ADDRESS	
12.12	CITY, ST, ZIP		13.12	CITY, ST, ZIP	
12.13	NAME		13.13	NAME	☐ Change ☐ Addition
12.14	STREET ADDRESS		13.14	STREET ADDRESS	
12.15	CITY, ST, ZIP		13.15	CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stipulated in Section 119.07(4)(b), Florida Statutes. I further certify that the information submitted 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. I am an officer or director of this corporation or the receiver or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this filing. I request, on no other basis, with an address.

SIGNATURE:

Ed Haley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95

305-961-7433