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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F77853

(2)

SNOWY EGRET, INC.

FILED	
Feb 18 1998 8:00am]
Secretary of State	

Principal Place of Business	Mailing Address		I INDINÈR ISIN IRRE IRRO FRANCI DILEM INI DIPIN	ATBUL ATAIL ALAKE ATAIL BUNE AND
FLESHER.STANLEY MICHAEL	FLESHER.STANLEY MICHA	NEL		
30 MAPLE STREET	30 MAPLE STREET	******	DO NOT WRITE IN T	HO COLOR
GUELPH, ONT. CANADA (NIG2G2)	GUELPH, ONT. CANADA ((NIG2G2)	DO NOT WRITE IN THE	115 SPACE
			04/27/1982	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2	¬		59-2202325	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	7		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 2	<u> </u>	0	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24 25 2 9. Name and Address of Current Re		30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
PASSIDOMO,KATHLEEN	Jierorou rigorii	81 Name	10. Franco and Francisco of from Hogiston	ou Agont
800 LAUREL OAK DR. #400				
NAPLES FL 33963		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
		83		
		001 00		Tool 70 Aug
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and	f 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the purpos	se of changing its registered
office or registered agent, or both, in the State of Fic agent. I am familiar with, and accept the obligations	orida. Such change was ai s of, Section 607.0505, Flor	uthorized by the corporati rida Statutes.	ion's board of directors. I hereby accept the	appointment as registered
SIGNATURE				
Signature, typed or printed name of registered agent and		Registered Agent signature require		
12. OFFICERS AND DIF		13.	ADDITIONS/CHANGES TO OFFICERS	
PLEALIED ALBERTIA	☐ DELETE	1.1 TITLE		Change Addition
AN HARLE OTREET		1.2 NAME		
OUT DU ONTADIO CAN		1.3 STREET ADDRESS		
TITLE P GUELPH, UNTARIO, CAN	☐ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME FLESHER, STANLEY MICHAEL		2.2 NAME		
STREET ADDRESS 30 MAPLE STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP GUELPH, ONTARIO, CAN		2. 4 CITY-ST-ZIP	,	
TITLE	DELETE	3.1 TITLE	***************************************	Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	-	Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	I DELETE	4.4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	☐ DELETE	5.1 TITLE		L Change L Addition
NAME		5.2 NAME	•	
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
	- Detter	1		The change The Wood (101)
NAME STREET ADDRESS		6.2 NAME		
CITY-ST-ZIP		6.3 STREET ADDRESS		
		6.4 CITY-ST-ZIP		l l

4. I hereby certify that the information supplied with this filling 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 pringular-port 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 trasper 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.

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