

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 # F88486

1. Corporation Name
SHAN-TOR INC.

Principal Place of Business
2111 NW 14TH AVE
FT LAUDERDALE FL 33311
US

Mailing Address
2111 NW 14TH AVE
FT LAUDERDALE FL 33311
US

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90122 028 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/26/1982
4. FEI Number
59-2232197
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 owes the current year (r tangible Personal Property Tax. ☐ Yes ☒ No
10. Name and Address of New Registered Agent

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25 Zip
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30 Zip

JOHNSON, W
2111 NW 14TH AVE
FT LAUDERDALE FL 33311

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *W. Johnson*
Signature, typed or printed name of registered agent, not title if applicable.

(NOTE: Registered Agent signature required when reinstating)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☒ Change ☒ Addition

12. OFFICERS AND DIRECTORS ☒ DELETE

TITLE VS
NAME JOHNSON, WILLOWPHINE
STREET ADDRESS 2111 NW 14 AVE
CITY-ST-ZIP FT LAUDERDALE FL 33311-3609 ☐ DELETE

TITLE PT
NAME JOHNSON, WILLOWPHINE
STREET ADDRESS 2111 NW 14 AVE
CITY-ST-ZIP FT LAUDERDALE FL ☐ DELETE

TITLE D
NAME JOHNSON, WILLOWPHINE
STREET ADDRESS 2111 NW 14 AVE
CITY-ST-ZIP FT LAUDERDALE FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Vice President
1.2 NAME SHANNON S. Taylor
1.3 STREET ADDRESS 2111 NW 14 Ave
1.4 CITY-ST-ZIP FT. LAUD, FL 33311-3609 ☐ Change ☒ Addition
2.1 TITLE Secretary
2.2 NAME ASHLEY Z. JOHNSON
2.3 STREET ADDRESS 2111 NW 14 Ave
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33311 ☐ Change ☐ Addition
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 2 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W. Johnson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/99 754 760 9495
Date Daytime Phone #

CR2E034 (1/98)