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Mar 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # G18950 (7)
1. Corporation Name
SHELMET CORPORATION



Principal Place of Business: 400 COLUMBIA DR STE 200 W PALM BCH FL 33409
Mailing Address: 400 COLUMBIA DR STE 200 W PALM BCH FL 33409-1968

3. Date Incorporated or Qualified: 01/17/1983
3a. Date of Last Report: 03/06/1996
4. FEI Number: 59-2246553
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: 21 380 COLUMBIA DR
Suite, Apt. #, etc.: 22 STE 105
City & State: 23
Zip: 24 Country: 25
2a. Mailing Address: 26 380 COLUMBIA DRIVE
Suite, Apt. #, etc.: 27 STE 105
City & State: 28
Zip: 29 Country: 30

9. Name and Address of Current Registered Agent: SCOTT, GREGORY 1645 PALM BCH LAKES BLVD, 1200 1645 PALM BEACH LAKES BLVD. WEST PALM BCH FL 33401
10. Name and Address of New Registered Agent: 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: C	DERER, SHELDON 400 COLUMBIA DR., #200 W. PALM BEACH FL	1.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: PD	DERER, GARY 400 COLUMBIA DR., #200 W. PALM BEACH FL	2.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	380 COLUMBIA DR., #105
TITLE: V	NADLER, JEFF 400 COLUMBIA DR., #200 W. PALM BEACH FL 33409	3.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	380 COLUMBIA DR., #105
TITLE: S	DERER, CAROL A 400 COLUMBIA DR., #200 W. PALM BEACH FL 33409	4.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	380 COLUMBIA DR., #105
TITLE: T	DERER, KIMBERLY 40 COLUMBIA DR., #200 W. PALM BEACH FL 33409	5.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	380 COLUMBIA DR., #105
TITLE: D	DERER, BARBARA 400 COLUMBIA DRWE 200 W. PALM BEACH FL	6.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	380 COLUMBIA DR., #105

14. I do 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.

SIGNATURE:  DATE: 3/7/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: GARY D. DERER

CR2E034 (9/96)