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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H10756 1. Corporation Name

SHESHEL, INC.

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

04-29-1999 90120 004 ***150.00



Principal Place of Business Mailing Address 4000 S.W. 19 STREET 4000 S.W. 19 STREET FT. LAUDERDALE FL 33317-6412 FT. LAUDERDALE FL 33317-6412 DO NOT WRITE IN THIS SPACE 3. Date ir corporated or Qualifed 07/03/1984 Applied For 2. Principa Place of Business 2a. Mailing Address 4. FEI Number Not Applicable 26 59-25 17 144 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Recuired 22 27 City & S ate City & State \$5.00 May Be 6. Electio : Campaign Financing \Box Added to Fees Trust Fund Contribution 28 23 Country Country Zip 8. This corporation owes the current year Intangible Zip 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Add ess of Current Registered Agent 81 LUSTHAUS, SHEILA Street Address (P.O. Box Number is Not Acceptable) 82 7828 TRENT DR BLDG. H APT 105 83 TAMARAC FL 33321 85 Zip Code 84 City F 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State or Florida. Such change was a uthorized 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 regulared when reinstating) Signature, typed or printed name of registered agent, and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE PC TITLE 1.2 NAME NAME FRESHMAN, SHELLEY 1.3 STREET ADDRESS STREET ADDRESS 4000 S.W. 19 STREET FT. LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE TITLE VST 2.2 NAME NAME LUSTHAUS, SHEILA 4000 S.W. 19 STREET 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY+ST-ZIP 2.4 CITY-ST-ZIF Addition Change ☐ DELETE 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 51 TITLE TILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRES: 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME

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 a inual 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)