Mailing Address

% REGIS MOREAU

1999

3033 NE 32ND AVE



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 06, 1999 8:00 am Secretary of State

05-06-1999 90056 043 ***150.00

Corporation Name	/ &	
SHOOTERS OF NORTH MIAI	MI BEACH INC.	
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								Trust Fund	Contrib	ution			Ad	ded to	Fees	
	Country	Zip Country					8. This corporation owes the current year Intangible									
									Personal Property Tax. Yes No							
9. Name and	Address of Current	Registered Agent					10. Name and Address of New Registered Agent									
DEALL DEGIS				87	Na	ime										
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LAUUERDALE FI	L 33308			83								<u> </u>				
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to the provisions of	of Sections 607\0502	and 607.1508, Flor	rida Statutes,	the above	-nar	ned corpora	ation s	submits th	is staten	nent for	the purp		changir	ng its r	egistered	
registered agent, o	r both, in the State of	Florida, Such char	nge was auth	orized by	the c	corporation's	s boa	ard of digeo	tors. I he	ereby ac	cept the	e appoir	itment :	as reg	stered	
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Name and Address of Current Registered Agent REAU, REGIS 3 NE 32 AVENUE LAUDERDALE FL 33308 to the provisions of Sections 602/0502 and 607.1508, Floring stered agent, or both, in the State of Florida, Such chairm familiar with and accept the obligations of, Section 607 OFFICERS AND DIRECTORS PD MOREAU, REGIS 3033 NE 32 AVENUE FT. LAUDERDALE FL VTD LAHAYE, AUREL 3033 NE 32 AVE FT.LAUDERDALE FL D MARANDA, ROLAND 3033 NE 32 AVE FT. LAUDERDALE FL D MARANDA, ROLAND 3033 NE 32 AVE FT. LAUDERDALE FL	Place of Business 2a. Mailing Address 26 #, etc. City & State 28 Country Zip 25 29 9. Name and Address of Current Registered Agent REAU, REGIS 3 NE 32 AVENUE LAUDERDALE FL 33308 to the provisions of Sections 607/0502 and 607.1508, Florida Statutes, egistered agent, or both, in they state of Florida. 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LAUDERDALE FI. 33008 DO NOT 1 3 Date Incorporated or Qual 10/29/1984 2a Mailing Address 4 FEI Number 2b 59-2479183 4 etc.	FT. LAUDERDALE FL 33308 DO NOT WRITE	FI. LAUDERDALE FI. 33308 DO NOT WRITE IN THIS 3. Date Incorporated or Quasified 10/29/1984 4. FEI Number 26. Suite, Api. #, etc. 27. Suite, Api. #, etc. 28. Crity & State 28. Country 29. Name and Address of Current Registered Agent 29. Street Address (P.O. Box Number is Not Acceptable) 29. Name and Address of New Registered 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. 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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 rue 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 if the receiver or trustee enhousemed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, if oyan attachment with any address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR