FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H78128

Principal Place of Business

SHIPPING AND GIFTS, INC.

145 SOUTH BARFIELD DR. %RONALD HEPINSTALL MARCO ISLAND FL 33937		145 SOUTH BARFIELD DR. %RONALD HEPINSTALL MARCO ISLAND FL 33937					DO NOT WRITE IN TH S SPACE 3. Date In corporated or Qualified 09/27/1985						
2 Principal Pl	ace of Business	2a. Mailing Address					4. FEI N				App	ied For	
	ace of Boomess	26			+	59-2	580327			Not	Applicable		
Suite, Apt. :	# etc	Suite, Apt. #, etc.				_ \$8.75 Additional					iditional		
22	.,,	27				5. Certifo	cite of Status Desire	ed 🗌	Fe	e Rec	uired		
City & S ate		City & State			6. Electio 1			o i Campaign Finan	cina	\$5	00 6	lav Be	
23 ~		28						Fund Contribution	, a 🗀			Fees-	
Zip	Country	Zip Country				8. This corporation owes the current year Intangible							
24	25	29	30				Personal Property Tax. ☐ Yes ☐ No						
	9. Name and Address of Current						10. Name and Address of New Registered Agent						
			1	81	Nan	ne							
HEPI	NSTALL, ROLAND		L.	-	- 5		(D.O. D.	Number in Not As	oontoblo)				
145	South Barfield Dr.		l'	82	Stre	et Acaress	s (P.O. Bo	x Number is Not Ac	ceptable)				
	CO ISLAND FL 33937			83									
				84	City					85	Zip C	nde	
	to the provisions of Sc ctions 607.0502				,					FL			
SIGNATURE		and title if applicable. (NOT	orida Statut				nen reinstating	<u> </u>	23-7 DAT	<u></u>			
12.	OFFICERS AND		13.				ADDIT	IONS/CHANGES TO	OFFICER				
TITLE	Р	☐ DELETE	1.1 TML	LΕ						Cha	nge	Addition	
NAME	HEPINSTALL, TERRI L.		1.2 NAM	ME									
STREET ADDRESS	1085 BALD EAGLE DR A201		1 3 STREET ADDRES		ss								
CITY-ST-ZIP	MARCO ISLAND FL		1.4 CIT	Y-ST	-ZIP				 <u>-</u>				
TITLE	ST	☐ DELETE	2.1 TITL	LE						Cha	nge	Addition	
NAME	HEPINSTALL, ROLAND, G		2.2 NA	ΝE									
STREET ADDRESS	1085 BALD EAGLE DR A-201		2.3 STRE		ADDRE	ss							
CITY-ST-ZIP	MARCO ISLAND FL		2.4 CIT	Y-\$1	T-ZIP								
TITLE		- DELETE	3.1 ftTt	3.1 TITLE						☐ Che	₩Ã 0	— ☐ Addition ·	
NAME			3.2 NAM	ME									
STREET ADDRESS			3.3 STF	REET	ADDRE	SS							
CITY-ST-ZIP			3.4. CIT	Y-\$1	T-ZIP								
TITLÉ		☐ DELETE	4.1 TITU	LΕ						☐ Cha	ınge	Addition	
NAME .			4. 2 NA	ME									
STREET ADDRESS			4.3 STF	REET	ADDRE	ss							
CITY-ST-ZIP			4.4 CIT	Y-ST	r-ZIP								
TITLE		☐ DELETE	5.1 TITE							Cha	inge	☐ Addition	
NAME			5.2 NAM	ME									
STREET ADDRESS			5.3 STF	REET	ADDRE	ss							
CITY-ST-ZIP				CITY-ST-ZIP									
TITLE		☐ DELETE	61 TITLE							Cha	inge	☐ Addition	
NAME			6.2 NA	ME								l l	

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 12 or Block 13 if changes, or prain attachment with an address with all other like empowered.

SIGNING OFFICE ? OR DIRECTOR

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90255 014 ***150.00