FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #
1. Corporation Name H91500

(9)

	IAN CUR	F SHOP, INC.													
Principal Place	of Business		Ma	ailing Addr	ess					110010H 011	\$ 18101 PAGO 19111 B	IAIN ABN ALAN	UNUIL BLUIL (DIT BIRKE HRBS
2015 PERLWINKLE WAY 2015 PERIWINKLE WAY SANIBEL FL 33957			2015 PERIWINKLE WAY Sanibel Fl 33957 US						3. Date Incorpora	atad or Qualifica	1 3a D	ate of Las	t Rery	ort	
US										12/24/19			02/10/		
2. Principal Pla	ace of Busin		2a.	Mailing A	ddress					4. FEI Number			1		olied For
1			26							59-262	8265			No	Applicable
Suite, Apt. a	#, etc.		27	Suite, Ap	t. #, etc.					5. Certificate of S	Status Desired				dditional quired
City & State	9			City & St	ate					6. Election Camp					May Be
3		., <u>.</u>	28			T				Trust Fund Co					Fees
Zip . 1		Country		Zipi		-	ountry			8. This corporation Florida Statute		or intangibi∈ ′es	tax unde	rs 18	9.032,
4]	0 Name	25 e and Address of Curre	29 ent Regis	tered Age	ent	30	1			10. Name and A			d Agent		
							81	Name	9						
CANNATI, RALPH							82	82 Street /		ss (P.O. Box Numbe	r is Not Accep	table)			
	PRING LIN										· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
FT. MY	ERS FL 3:	3919					83								
							84	City					L 85	Zip (Code
TI. FUISUAIDE	to the bross	สดทราง: อยบบบทรางบูกเบอเ	JZ & 11U UU				つかいねっぱ					porpose or		red a	root Lan
		sions of Sections 607.050 both, in the State of Fig and the Digations of Se									by accept the a				gerii. Farii
SIGNATURE		r both, in the State of Flo and the digations of Se of or central hand of registered age OFFICERS A	n and the fr	applies the			ad Ager			wtien reinsfaling)	y accept the a	DATE			
SIGNATURE		d or prorted ham y of registered age	n and the fr	applicable		OTE. Registe	ad Ager			wtien reinsfaling)		DATE		TOR	
SIGNATURE 12. III.E	PC CANN	of a central family of registract age OFFICERS AI	n and the fr	applicable	(NC	Tt. Register	ad Ager			wtien reinsfaling)		DATE	ND DIREC	TOR	S IN 12
SIGNATURE 12. TILE NAME	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applicable	(NC	13 1.1	ed Ager I. I TITLE NAME		e respired :	wtien reinsfaling)		DATE	ND DIREC	TOR	S IN 12
SIGNATURE 12. DILF NAME SPREEL ALDRESS	PC CANN 2015	of a central family of registract age OFFICERS AI	n and the fr	applic. 146 CTORS	DELETE	13 1.2 1.3 1.4	ed Agen I. I TITLE NAME STREET CITY-S	at signatur	e respired :	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition
SIGNATURE 112. THEF NAME STREET ALCRESS CHY-ST-ZIF	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applic. 146 CTORS	(NC	13 1.: 1.2 1.3 1.4 2	nad Agen I. I TITLE NAME STREET CITY-S	at signatur	e respired :	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12
SIGNATURE 12. DITE NAME STREET AUGUSS CID ST 701	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applic. 146 CTORS	DELETE	13 1. 1.2 1.3 1.4 2 2.2	ad Ager I. I TITLE NAME STREET CITY-S I TITLE NAME	at signatur ADDRES	tori cor	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition
12. THE FORMAT OFFE SERVER AND S	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applic. 146 CTORS	DELETE	1.2 1.3 1.4 2 2.2 2.3	nd Agen I TITLE NAME STREET CITY-S DITLE NAME STREET	ADDRES	tori cor	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition
SIGNATURE 12. HEE NAME STREET AUGRESS CITY ST. 701 NAME SHREET ADDRESS CITY ST. 742	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applicable	DELETE	13 1.1 1.2 1.3 1.4 2 2.2 2.2 2.3 2.4	ad Agen I TITLE NAME STREET CITY-S I TITLE NAME STREET CITY-S	ADDRES	tori cor	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition Addition
SSIGNATUFIE 12. THEF NAME SPREET AUDRESS CITY STEADURESS CITY STEADURESS CITY STEADURESS THEF	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applicable	DELETE	13 1.1 1.2 1.3 1.4 2 2.2 2.3 2.4 3.	ad Agenta. I TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRES	tori cor	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition
SIGNATURE 12. THE FINAME SPREEF AUDRESS CITY STEZIT THE FINAME SPREEF ADDRESS CITY STEZIT TICLE THANKE	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applicable	DELETE	1 1 1 1 2 1 3 3 2 4 3 3 3 3 3 3 3 3 3 3 3 5 5 1 1 1 1 1 1 1	Agendades I TITLE NAME STREET NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS ADDRESS ADDRESS T-ZIP	E LOVI (POT S	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition Addition
SIGNATUFIE 12. 14. 14. 15. 16. 16. 16. 16. 16. 16. 16	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	applicable	DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ADAME STREET CITY-S TABLE NAME STREET CITY-S TABLE NAME STREET CITY-S TABLE NAME STREET	ADDRESS T-ZIP ADDRESS T-ZIP	E LOVI (POT S	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition Addition
SIGNATURE 12. ILLE NAME SIRELLAUDRESS CITY STEZIC THE NAME SERELLAUDRESS CITY STEZIC THE NAME SIRELLAUDRESS CITY STEZIC SIRELLAUDRESS CITY STEZIC CITY STEZIC CITY STEZIC CITY STEZIC	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	ajgde. We	DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Agendades I TITLE NAME STREET NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS T-ZIP ADDRESS T-ZIP	E LOVI (POT S	wtien reinsfaling)		DATE	ND DIREC	CTOR:	S IN 12 Addition Addition
12. THE FORM TO THE STREET ADDRESS CITY STORY THE STREET ADDRESS CITY STORY THE STREET ADDRESS CITY STORY THE NAME STREET ADDRESS CITY STORY THE TADDRESS CITY STORY	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	ajgde. We	DELETE DELETE	13 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ON AGENT I. TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME CITY-S CITY-S CITY-S CITY-S CITY-S	ADDRESS T-ZIP ADDRESS T-ZIP	E LOVI (POT S	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition
SIGNATURE 12. DUF NAME SHEEL AUDRESS GID - ST 70° THUF NAME SHEEL ADDRESS GID - ST 70° THUF NAME SHEEL ADDRESS GID - ST 70° THUF NAME SHEEL ADDRESS GIT - ST 70° THUF NAME NAME	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	ajgde. We	DELETE DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ON AGAIN OF THE PROPERTY OF T	ADDRESS T-ZIP ADDRESS T-ZIP	c c c c c c c c c c c c c c c c c c c	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition
SIGNATUFIE 12. DIEF NAME STREET AUDRESS GID - ST 701 THE NAME STREET ADDRESS CHY - ST 702 THEE NAME STREET ADDRESS GHY-ST 702 THEE NAME STREET ADDRESS NAME STREET ADDRESS	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. We	DELETE DELETE DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ON AGAIN OF THE PROPERTY OF T	ADDRES ADDRES ADDRES ADDRES T ZIP T ADDRES T ADDRES	c c c c c c c c c c c c c c c c c c c	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition
SIGNATURE 12. DUF NAME STREET AUDRESS GID - ST 70* THUF NAME STREET ADDRESS CITY - ST 70* THUF NAME STREET ADDRESS GITY - ST 70* THUF NAME STREET ADDRESS GITY - ST 70* THUF NAME STREET ADDRESS GITY - ST 70*	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. We	DELETE DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ON AGENTAL OF THE PROPERTY OF	ADDRES ADDRES ADDRES ADDRES T ZIP T ADDRES T ADDRES	c c c c c c c c c c c c c c c c c c c	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition
12. THE FOR ADDRESS CITY STORY STOR	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. We	DELETE DELETE DELETE	1. 1.2 1.3 1.4 2 2.2 2.3 2.4 3.3 3.4 4.4 4.5 5.5 5.5	ON AGENT AND AGENT AND AGENT A	ADDRES T-ZIP T-ADDRES T-ZIP ADDRES T-ZIP ADDRES T-ZIP ADDRES T-ZIP	22.2	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition
SIGNATUFE 12. THEF NAME SPREET ADDRESS CID - ST ZIP THEF NAME SIRE FLADDRESS CITY - ST ZIP THEF NAME SIRE FLADDRESS CITY - ST ZIP THEF NAME STREET ADDRESS CITY - ST ZIP THEF NAME	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. We	DELETE DELETE DELETE	1. 1.2 1.3 1.4 2 2.2 2.3 3.3 3.4 4.4 4.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5	ON AGENT AND A STREET OF THE AGENT AND A STR	ADDRES ADDRES	22.2	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition
SIGNATURE 12. DILE NAME SPRET ALCRESS CITY ST. ZIP THE NAME SPRET ADDRESS CITY ST. ZIP THEE NAME STREET ADDRESS CITY ST. ZIP THEE	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. 34	DELETE DELETE DELETE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ON AGENT OF THE PROPERTY OF TH	ADDRES ADDRES	22.2	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition Addition
SIGNATURE 12. THEF NAME SPRET ALCRESS CITY STOZE THEF NAME STREET ADDRESS	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. 34	DELETE DELETE DELETE	1. 1.2 1.3 1.4 2 2.2 2.3 2.4 3.3 3.2 4.4 4.5 5.5 5.5 5.6 6.6	ON AGENT AND A STREET OF THE AGENT AND AGENT AND AGENT AND AGENT AND AGENT AND AGENT	ADDRES ADDRES	22.2	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition
SIGNATURE 12. THE NAME STREET ALCRESS CHY ST. ZIP THEE NAME STREET ADDRESS CHY ST. ZIP THEE NAME STREET ADDRESS CHY-ST. ZIP THEE NAME STREET ADDRESS CHY-ST. ZIP THEE NAME STREET ADDRESS CHY-ST. ZIP THE NAME STREET ADDRESS CHY-ST. ZIP	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. 34	DELETE DELETE DELETE	1. 1.2 1.3 1.4 2 2.2 2.3 2.4 3.3 3.4 4.4 4.5 5.5 5.5 5.6 6.6 6.6	ON AGENT AND A STREET OF THE AGENT AND AGENT AGENT AND AGENT	at signatur ADDRES ADDRES T ZIP ADDRES T ADDRES T ADDRES T ADDRES ST ZIP ADDRES ST ZIP	S S S	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition Addition
SIGNATURE 12. THE FINAME STREET ALCRESS CHY ST. ZIP THE FINAME STREET ADDRESS CHY ST. ZIP THE FINAME	PC CANN 2015	OFFICERS ALIATI, RALPH PERIWINKLE WAY	n and the fr	aydic. 34	DELETE DELETE DELETE	57f. Register 13 1. 12 13 1.4 2 22 23 24 3 32 4. 42 4. 5 5 52 6 6 62 66 66	ON AGENT AND A STREET OF THE AGENT AND AGENT AGENT AND AGENT	ADDRESS ADDRES	S S S	wtien reinsfaling)		DATE	ND DIRECT Chan	CTOR:	S IN 12 Addition Addition Addition Addition

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 only, 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 committee the state of the state of

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-96 813, 472.8938