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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J13382

(3)

SHERAH CORPORATION

Mailing Address

% CRAIG R. LIEPPER 4007 N. FEDERAL HWY. FT.LAUDERDALE FL 33308

Principal Place of Business

% CRAIG R. LIEPPER 4007 N. FEDERAL HWY. FT.LAUDERDALE FL 33308-552

FILED Apr 28 1997 8:00am Secretary of State



, FT.	Lauderdal	E FL 33308		FT.LA	uderdale fl 3330	8-5528								
										 Date Incorporated or Qualified 05/07/1986 		te of Last 01/1996		
2. 21	Principal Place of Business			 -	2a. Mailing Address					4. FEI Number			Applied For	
	Suite, Apt. #, etc.				Suite, Apt. #, etc.				<u>-</u>	59-2676744			Not Applicable	
22				27	⊢ ¬					5. Certificate of Status Desired See Required				
City & State				Cit	City & State					6. Election Campaign Financing \$5.00 May Be				
23				28						Trust Fund Contribution			to Fees	
_	Zip	<u>├</u> ─┐			Cou	intry			B. This corporation has liability for it			s. 199.032,		
25 29 30 9. Name and Address of Current Registered Agent							0]		J	Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	LIEP	PER, SAN					81	Name		10, Italio and Address of New Hey	11310100 2	gont		
4007 N. FEDERAL HWY.							20	O Constitution (D C De North Constitution)						
FT. LAUDERDALE FL 33308								Street Address (P.O. Box Number is Not Acceptable)						
							В3							
							84	City				Ta=1 "3"	01-	
								•			FL		Code	
11.	Pursuant t office or re agent. I ar	o the provis egistered ag n famlliar wi	ions of Sections 607.050; ent, or both, in the State th, and accept the obliga	2 and 607.1 of Florida. S itions of, Sc	508, Florida Statut Such change was a ection 607.0505, Flo	es, the at authorized orida Stat	bove d by utes	named the corp	corpor	ation submits this statement for the p n's board of directors. I hereby accep	rpose of the appo	changing pintment a	its registered s registered	
SIG	NATURE .	Signature, typod	or printed name of registered age	it and little if app	plicable. (NOT	E Registered	d Age	n signature i	required	when reinstating)	DATE	·		
12.	· · · · · · · · · · · · · · · · · · ·	- N	OFFICERS AND	DIRECTO		13.				ADDITIONS/CHANGES TO OFFICE				
TITLE		h h	ODAIO D		L] DELETE	1.1 TII	TLE					Change	Addition	
NAMI			, CRAIG R. V. 108 AVE.			1.2 NA								
	ET ADDRESS		SPRINGS FL 33076					ADDRESS						
TITLE	ST-ZIP	D	PENINGS PL 330/0		DELETE	1.4 CI 2.1 TI		1 - 71P				Change	Addition	
NAMI		-	IRWIN R.			2.1 11 2.2 NA						☐ Change	Addition	
	ET ADDRESS		RK AVE #19L					ADDRESS						
	ST-ZIP	NEW YO				2.4 C								
TITLE		VS			DELETE	3.1 11		1-211				Change	Addition	
NAME	:	LIEPPER	, sandra r			3.2 NA	W.E					_ `		
STRE	ET ADDRESS		V. 106 AVE.			3.3 S1	REET.	ADDRESS						
CITY	ST-ZIP	CORAL S	SPRINGS FL 33076			3.4. CI	ITY - S	1-21P						
TITLE	Ţ				DELETE	4.1 TI	TLE					Change	Addition	
NAME	· •]					4. 2 N	AME							
	T ADDRESS					4.3 ST	REFT	ADDRESS						
	ST-ZIP		· · · · · · · · · · · · · · · · · · ·		T Ref. Face	4.4 Ci		1 - ZIP						
TITLE					L DELETE	5.1 111						L Change	Addition	
NAME						52 N/								
	T ADORESS							ADDRESS						
CITY-	ST-ZIP		······································		DELETE	54 CI		- ZIP				Change	Addition	
NAME						61 1 7 62 MA					l		☐ Addition	
	T ADDRESS					62 NA		ADDRESS						
	ST-ZIP					6.4 CI		1						
14.	I do hereb	y certify that	the information supplied	with this fi	ling does not qualif	ly for the	ovor	motion et	ated in	Section 119,07(3)(i), Florida Statutes	. I further	certify tha	it the	
	intormation	i indicated (on this annual report or si	upplementa	il annual report is ti	rue and a	ICCU	rate and :	that m	y signature shall have the same legal is required by Chapter 607, Florida St	effect as	if made u	nder oath, that	