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

**PROFIT** CORPORATION. ANNUAL REPORT

1999

SHEEHAN IMPORTS, INC.

DOCUMENT #

1. Corporation Name



J39475

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90108 002 \*\*\*150.00



Principal Place of Business Mailing Address							lit i Harl Ather innite Hist Grace		911 STRILE	1811 1841		
% TIMOTHY A SHEEHAN 2720 N. FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064		% Timothy A. Sheehan 2720 N. Federal Highwa) Lighthouse Point Fl. 33C64				DO NOT WRITE IN THIS SPACE						
						3. Date Incorporated 10/22/1986	d or Qualifed					
a Principal (II	lace of Business	2a. Mailing Address				4. FEI Number			Applied	l For	l	
Z. Frincipai M	lace of Business	26			1 "	) " <del></del>			plicable	1		
Suite, Apt	# etc	Suite, Apt. #, etc.						\$8.7	<b>5</b> Addit		1	
22	m, 610.	27				5. Certifcat 3 of Statu	us Desired 🗌		Requir			
City & State	e	City & State				6. Election Campaig	ın Financing	\$5.0	00 May	Be	l	
23		28				Trust Fund Contribution Added to Fees			1	j		
Zip Country		Zip Cou				8. This corporation of	owes the current year li	tangible				
24	25 29 30		30			Personal Property Tax. Yes No			10			
	9. Name and Address of Current	Registered Agent				10. Name and Addre	ess of New Registered	Agent				
O. 11-				81	Name					ļ		
	EHAN, TIMOTHY A.			82	Street	Address (P.O. Box Number is	s Not Acceptable)				ĺ	
	N. FEDERAL HIGHWAY										1	
ЦСГ	ITHOUSE POINT FL 33064			83							ł	
				84	City		F	85 Z	ip Code	,		
office our	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was a	uthorized	i by 1	the corpo	corporation submits this state oration's board of directors. I	ement for the purpose of hereby accept the appo	f changing intment as	its registe	stered red	l	
SIGNATURE	in anima vini, and in aprime congr.					_						
	Signature, typed or printed nan e of registered agent	- <del></del>	_	Agent	signature r	equi ed when reinstating)	DATE	ND DIDE	77000	IN 40	<u> </u>	
12.	DEFICERS AND	DELETE	13.			ADDITIC NS/CHAN	IGES TO OFFICERS /	□ Chan		Addition	(11/98	
TITLE	DPT	L) Deteic	1.1 111									
NAME	Sheehan, Timothy A.   2720 n. Federal Highway		1.2 NA		*D00ECC						5	
STREET ADDRESS	LIGHTHOUSE POINT FL				ADDRESS						R2F034	
CITY-ST-ZIP TITLE	DVS	☐ DELETE	2.1 TI	TY-ST	- ZIF			Chan	ge [	Addition	5	
NAME	SHEEHAN, JEREMIAH T.	<u> </u>	2.2 NA					_		_		
STREET ADDRESS	ATAA NI EEDEDAN NIOLENAV			2.3 STREET ADDRESS								
	LIGHTHOUSE POINT FL		2.4 C								1	
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NAME			3.2 NA	ME							1	
STREET ADDRESS			3.3 STREE		ADDRESS						1	
CITY-ST-ZIP			3.4 CITY-		T- ZIP							
TITLE		DELETE	4.1 TI	TLE				Char	ige [	Addition		
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STREET ADDRESS			4.3 STRE		ADDRESS							
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TITLE		☐ DELETE	5.1 TI					☐ Chan	ige [	Addition	ĺ	
NAME			5.2 NAME									
STREET ADDRESS				3 STREET ADDRESS 4 CITY-ST-ZIP							ĺ	
CITY-ST-ZIP_		☐ SELETE			-ZIP			[TChan	nne F	7 Addition	}	
TITLE		☐ DELETE	DELETE 6.1 TI					L] Char	ye [		1	
NAME			62 N/		ADDECE							
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP	<u> </u>	The state of the s	6 4 CI	IY-ST	- ZIP	1 - C-4 440 0 (2)() El-	ida Statutos 1 further a	autifur that t	ho infor	mation	İ	

14. Thereby certify that the information supplied with this filling 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 signal ure shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 change 1, or on an attachment with an agrees, with although the empowered.

SIGNATURE:

**■** (3)