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

SIGNATURE:

**PROFIT** May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K47769 (0) SHAWN TAYLOR, INC. Principal Place of Business Mailing Address 5450 SOUTH STATE BOAD 7 5450 SOUTH STATE ROAD 7 FT LAUDERDALE FL 33314 FT. LAUDERDALE FL 33314 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/29/1988 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0271382 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARSHALL, MARY JANE 5450 SOUTH STATE ROAD 7 Street Address (P.O. Box Number is Not Acceptable) SUITE 35 83 FORT LAUDERDALE FL 33314 84 City Zip Code 11. Pursuan to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am family with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. SEFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 11 TITLE MARSHALL, MARY JANE NAME 1.2 NAME 5450 SOUTH STATE ROAD SUITE 35 STREET ADORESS 1.3 STREET ADDRESS FORT LAUDERDALE FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 21 TITLE JOHN RAY FRIEDRICH NAME 22 NAME 5450 SO STATE RD 7 SUTEI 35 STREET ADDRESS 2 3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 31 TITLE ☐ Change ☐ Addition **BOBBIE L GENTRY** NAME 3.2 NAME 5450 ST STATE RD 7 SUTIE 35 STREET ADDRESS 3.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP DELETE 51 TITLE Change Addition TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 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 Chapter 607, or on an attachment with an address.

**FILED**