

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

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Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K79502

(6)

1. Corporation Name
SHORE ENGINEERS INC.

Principal Place of Business

125 AIRPORT RD N
SUITE 201
NAPLES FL 33942

Mailing Address

125 AIRPORT RD N
SUITE 201
NAPLES FL 34104-3529

3. Date Incorporated or Qualified
04/12/1989

3a. Date of Last Report
04/22/1996

2. Principal Place of Business

21 3838 TAMIA MITR. N.
Suite, Apt. #, etc.

2a. Mailing Address

26 3838 TAMIA MITR. N.
Suite, Apt. #, etc.

4. FEI Number
65-0120226

Applied For
Not Applicable

22 SUITE #408
City & State

27 SUITE #408
City & State

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 NAPLES, FLORIDA
Zip Country

28 NAPLES, FLORIDA
Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 34103

25 COLLIER

29 34103

30 COLLIER

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OWLIAEI, BAHRAM
125 AIRPORT RD N
SUITE 201
NAPLES FL 33942

81 Name OWLIAEI, BAHRAM
82 Street Address (P.O. Box Number is Not Acceptable)
3838 TAMIA MITR. N.
83 SUITE #408
84 City NAPLES, FLORIDA FL 85 Zip Code 34103

11. Pursuant 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Bahram Owliaei
Signature of Registered Agent (For printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

4-4-97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP	<input type="checkbox"/> DELETE
NAME	OWLIAEI, BAHRAM	
STREET ADDRESS	2711 CITRUS LAKE DR #108	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	OWLIAEI, BAHRAM	
1.3 STREET ADDRESS	270 MONTEREY DRIVE	
1.4 CITY-ST-ZIP	NAPLES, FL. 33999	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 changed, or on an attachment with an address.

SIGNATURE:

Bahram Owliaei
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-97
Date

941-643-6633
Daytime Phone #

CR2E034 (9/96)