Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90035 043 \*\*\*150.00

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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **PROFIT**

## 1999

DOCUMENT # L15642 1. Corporation Name

THE SHOPS OF BOCA, INC.

Principal Place of Business		Mailing Address			i (dalidit dat plant ante atten di bre cies ere	)ı Biğli Biğti ğısıı Sı	1011 01011 1001
11811 NORTH FREEWAY		11811 NORTH FREEWAY					
SUITE 300		SUITE 300 HOUSTON TX 77060 US		DO NOT WRITE IN TH	IS SPACE		
HOUSTON TX 77060				3. Date Incorporated or Qualifed			
US		05			09/08/1989		
2 5	lead of Divisions	2a. Mailing Address			4. FEI Number	I An	plied For
<u> </u>	ace of Business	<b>⊢</b>			58-1859867	<del></del>	t Applicable
Suite, Apt.	# ots	Suite, Apt. #, etc.				\$8.75 A	
22		27		5. Certifcate of Status Desired	Fee Re		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year		_
24	25	29 3	30		Personal Property Tax.		□No
Name and Address of Current Registered Agent				.1	10. Name and Address of New Registere	ed Agent	
DEVED DAVID A				Name	•		
BEYER, DAVID A			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
% RUDNICK & WOLFE			<u> </u>		<u> </u>		
101 E. KENNEDY BLVD., SUITE 2000			83	1			ļ
TAMPA FL 33602			84	\$ City		85 Zip C	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a					<b>F</b>		
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	it Florida. Such change was aut	thorized Di	v tne corbora	tion's board of directors. I hereby accept the ap	pointment as reg	gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	ent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	DPS	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	RUSCA, FAUSTO C.		1.2 NAME				
STREET ADDRESS	11811 NORTH FREEWAY 300		1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	HOUSTON TX		1.4 CITY-	ST-ZIP		•	
ILLE .	VT	DELETE	2.1 TITLE			Change	Addition
NAME	TOMBARI, MICHAEL G.		2.2 NAME				
STREET ADDRESS	11811 NORTH FREEWAY 300		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	HOUSTON TX		2, 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME	:			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	_		3.4. CITY-	ST-ZiP	<u>.</u>		
TITLE		☐ DELETE	4.1 TITLE	,		Change	☐ Addition
NAME			4. 2 NAM	<b> </b>			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	T		Change	☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

281/820-0747

Change

☐ Addition