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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

L59420

(4)

SHEAR PARADISE, INC.

FILED May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						L LABELLAND MOD DELICA HEREN ALBERT ABELL	/UIT 11011 UITIT UIUIT UI	B 1001	
C/O PAULINE G. STRIZZI 154 VISTA ROYALE BLVD. VERO BEACH FL 32962		154 VISTA RO	C/O PAULINE G. STRIZZI 154 VISTA ROYALE BLVD. VERO BEACH FL 32962			DO NOT WRITE IN THIS SPACE			
72110 001011	T G GEOVE	12110 9211011				3. Date Incorporated or Qualified			
						03/19/1990			
2. Principal Pl	lace of Business	2s. Mailing Ad	dress			4. FEI Number	Applic	ed For	
21		26				59-3000694		Applicable	
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	0	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Ζφ	F			8. This corporation owes or has paid the current year Intangible			
24	25	29	30	.0]		Personal Property Tax due June 30.	Yes LIN	40	
	9, Name and Address of Curre	ent Hegistered Agen	<u> </u>	81	Name	10, Name and Address of New Registere	a Agent		
	IIT e , Janet e.			61	ivame			1	
	4 vis ta royal blvd. R o Beach Fl 32962				Street Ad	Address (P.O. Box Number is Not Acceptable)			
,				83					
				84	City	F	L 85 Zip Coo	de	
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such chi	ange was auti	horized by	the corpor	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	of changing its re opointment as rec	egistered gistered	
SIGNATURE									
	Signature, typed or presed cance of register, dia		(NOT: R		nt signature rec	quired when reinstating) DATE			
12.		ND DIRECTORS	DELETE	13.	1	ADDITIONS/CHANGES TO OFFICERS A		Addition	
TITLE	DP	لسا	DELETE	1.1 TITLE			C change E	_ Addition	
NAME	WHITE, JANET E			1.2 NAME				13	
STREET ADDRESS	1850 25TH AVENUE			1.3 STREET				1	
CITY-ST-ZIP	VERO BEACH FL.		1.4 CITY - S	T-ZIP		Change	Addition		
TITLE	DVP		DELETE	2.1 TITLE			Change	☐ Modition 1.	
NAME	CLARK, SUZANNE			2.2 NAME				1	
STREET ADDRESS	2335 SW 14TH STREET			2.3 STREET				1	
CITY-ST-ZIP	VERO BEACH FL		DELETE	2. 4 CITY - 5	iT-ZIP			Addition	
TITLE			DELETE	3.1 TITLE			Change	Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET				1	
CITY-ST-ZIP			DC: CTC	3.4. CITY- S	ST-7IP		Change	Addition	
TITLE			DELETE	4.1 TITLE			Change	→ ₩00(((O))	
NAME				4. 2 NAME]	
STREET ADDRESS				4.3 STREET				İ	
CITY-ST-ZIP		·····	DELETE	4.4 CITY - S	1- ZIP		Change	Addition	
TITLE		LJ	DELFTE	5.1 TITLE			Li unange L	T VORIORI	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	<u> </u>				
CITY-ST-ZIP			DELETE	5.4 CITY - S	T-ZIP		Change	Addition	
TITLE		L	DELETE	6.1 TITLE			FT claude F	Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET					
CITY-ST-ZIP	etile that the information	will, thus fibers does o	ot avalify for t	6.4 CITY - S		in Section 119 07/3Vi) Florida Statutes I further	portify that the inf	formation	

Thereby comity that the information supplied with this timing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 trustice 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 all achiment with an address.