FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED
95 MAY 11 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L76566 (3)

1. Corporate Name

SHIMBERG HOMES, INC.

Principal Place of Business:
% RICHARD E. SHIMBERG
3550 WEST BUSCH BLVD., SUITE 145
TAMPA FL 33618

Mailing Address:
% RICHARD E. SHIMBERG
3550 WEST BUSCH BLVD., SUITE 145
TAMPA FL 33618

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 10901 CARROLLWOOD DR.	2a. Mailing Address: 26 10901 CARROLLWOOD DR.
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23 TAMPA, FL.	City & State: 28 TAMPA, FL.
Zip: 24 33618 Country: 25 USA	Zip: 29 33618 Country: 30 USA

3. Date Incorporated or Qualified: 05/30/1990
3a. Date of Last Report: 09/22/1994
4. FEI Number: 59-3014387 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
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
SHIMBERG, RICHARD B. 3550 WEST BUSCH BLVD. SUITE 145 TAMPA FL 33618	81 Name: RICHARD E. SHIMBERG 82 Street Address (P.O. Box Number is Not Acceptable): 10901 CARROLLWOOD DRIVE 83 84 City: TAMPA FL 85 Zip Code: 33618

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 S. 607.0505, Florida Statutes.

SIGNATURE [signature] RICHARD E. SHIMBERG DATE 5/3/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	SHIMBERG, RICHARD E.	1.2 NAME	RICHARD E. SHIMBERG
STREET ADDRESS	3550 W. BUSCH BLVD.,#145	1.3 STREET ADDRESS	10901 CARROLLWOOD DR.
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	TAMPA, FL. 33618
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] RICHARD E SHIMBERG (813) 949-6340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 5-3-95
Daytime Phone

0299849 CP