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Feb 17 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 # M47746 (6)

1. Corporation Name
SHEEP WORLD, INCORPORATED



Principal Place of Business

2201 SE INDIAN STREET
UNIT G-20
STUART FL 34997
US

Mailing Address

2201 SE INDIAN STREET
UNIT G-20
STUART FL 34997-4968
US

3. Date Incorporated or Qualified
03/05/1987

3a. Date of Last Report
02/26/1996

2. Principal Place of Business

21 3052 NW Federal Hwy

Suite, Apt. #, etc.

22 City & State
Jensen Bch FL

23 Zip
FL 34957

Country
Martin

2a. Mailing Address

26 3052 NW Federal Hwy

Suite, Apt. #, etc.

27 City & State
Jensen Bch FL

28 Zip
34957

Country
Martin

4. FEI Number
59-2782455

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

HUGHES MICHAEL F.
2201 SE INDIAN ST G-20
STUART FL 34997

10. Name and Address of New Registered Agent

81 Name
Hughes Michael F
82 Street Address (P.O. Box Number is Not Acceptable)
1364 Croton St
83
84 City
Jensen Bch FL 85 Zip Code
34957

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
Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE
1/27/97

12. OFFICERS AND DIRECTORS

TITLE	DT	☐ DELETE
NAME	DATZ, DEBORAH	
STREET ADDRESS	927 KUBIN AVENUE	
CITY-ST-ZIP	JENSEN BCH. FL	
TITLE	D	☐ DELETE
NAME	MULLIGAN, ANGELA	
STREET ADDRESS	3052 N FEDERAL HWY	
CITY-ST-ZIP	JENSEN BEACH FL	
TITLE	PSD	☐ DELETE
NAME	HUGHES, MICHAEL	
STREET ADDRESS	927 KUBIN AVENUE	
CITY-ST-ZIP	JENSEN BCH. FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Mulligan Angela
2.3 STREET ADDRESS	1364 Croton St
2.4 CITY-ST-ZIP	Jensen Bch FL 34957
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Hughes Michael
3.3 STREET ADDRESS	1364 Croton St
3.4 CITY-ST-ZIP	Jensen Bch FL 34957
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone