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 # M74020 (2) SHAMROCK ENTERPRISES OF SARASOTA, INC.								18	
Principal Place of Business Mailing Address								- TABINDAN IN IODN BIBIN GOILD NON BON BIBIN BIBIN BIBIN BIBIN B	IDIA DARA BIRAF DEDII 108)
3800 S. TAMIAMI TRAIL 3800 S. TAMIAMI TRAIL					AMIAMI TRAIL				
#16 #16								DO NOT WRITE IN THIS SI	DACE
8 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				SARAOSTA FL 34239 US				3. Date Incorporated or Qualified	AOL
ľ				•				03/28/1988	
2.	Principal Pl	ipal Place of Business 2a. Mailing Address						4. FEI Number	Applied For
21				26				65-0038021	Not Applicable
	Suite, Apt.	uite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 Additional
22	· ·	27							Fee Required
23	City & State	·						6. Election Campaign Financing	\$5.00 May Be
23	Zip	Country Zip				Country		Trust Fund Contribution	Added to Fees
24	E-P		25	29	!	30		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	Yes No
-		9, Name	and Address of Curre			30		10. Name and Address of New Registered A	
	KA'	THI FEN F	THOMPSON			81	Name		- <u></u>
		S OSPRE				82	Street Ad	Idress (P.O. Box Number is Not Acceptable)	
#409						\ \frac{1}{2}	01100170		
SARASOTA FL 34236						83			
						84	City		85 Zip Code
L							1	FL_	1-1
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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									changing its registered intment as registered
SIGNATURE									
12		Signature, typed	or printed name of registered a	gent and title if applicable ND DIRECTORS	e (NO1E	Registered Ago	ont signature req	DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12
TIT		VP.	OFFICENS A	NO DIRECTORS	DELETE	1.1 TITLE			Change Addition
NAI		**	NHAN, GEORGE DAI	NIEL		1.2 NAME		•	[;
1	EET ADDRESS		TAMIAMI TR #16	1120		1.3 STREET	ADDRESS		13
СП	Y-ST-ZIP	SARAS				1.4 CITY - S	- 1		[
TIT		Ť			DELETE	2.1 TITLE			Change Addition
NAI	ME	SHANA	NHAN, MARY E.			2.2 NAME			
STR	TREET ADDRESS 3800 S TAMIAMI TR, #16					2.3 STREET ADDRESS			ĺ
	Y-ST-ZIP	ŞA RAS	OTA FL			2, 4 CITY - 3	ST-ZIP		
וזונ		8			DELETE	3.1 TITLE		į	Change Addition
NA			HAN, BARBARA A.			3.2 NAME			ļ
	EET ADDRESS	ALDIA	TAMIAMI TR, #16			3.3 STREET			1
TIT	Y-ST-ZIP	SAKASI	VIA EL		DFLETE	3.4. CITY - 5 4.1 TITLE	ST-ZIP		Change Addition
NA!	•	F VATIES	N E THOMPSON		DI DI CLIE	4.3 HILE 4.2 NAME	1	L	Towards T Vaginals
	ME LEET ADDRESS		TAMIAMI TR #16			4.2 NAME	ADORECC		
· ·	Y-ST-ZIP	SARAS				4.4 CITY - S	·····		
TITL		ON PAGE	VIAIL		DELETE	5.1 TITLE	1-2"		Change Addition
NAA	ľ					5.2 NAME			
1	EET ADDRESS					5.3 STREET	ADDRESS		1
	Y-ST-ZIP					5.4 CITY-S			
TITL					DELETE	6.1 TITLE			Change Addition
NAA	AE .					6.2 NAME	1		
STR	EET ADDRESS					6.3 STREET	address		
CIT	Y-ST-ZIP					6.4 CfTY - S	T-ZIP		1

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.

941-953-8267

FILED

May 05 1998 8:00am

Secretary of State