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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M90395 (8)

1. Corporation Name  
SHEILA SHERBERT, INC.



Principal Place of Business  
9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS FL 33410  
US

Mailing Address  
9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS FL 33410-4834  
US

3. Date Incorporated or Qualified: 07/20/1988  
3a. Date of Last Report: 04/12/1996  
4. FEI Number: 65-0071240  
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

2. Principal Place of Business  
21 Suite, Apt #, etc.  
22 City & State  
23 Zip  
24 Country  
25  
2a. Mailing Address  
26 Suite, Apt #, etc.  
27 City & State  
28 Zip  
29 Country  
30

9. Name and Address of Current Registered Agent  
JIMENEZ, SHEILA S.  
9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent  
81 Name: Sheila SHERBERT  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City: FL 85 Zip Code

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: *Sheila Sherbert, Pres* DATE: 3-1-97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE: TSD  
NAME: JIMENEZ, SHEILA  
STREET ADDRESS: 9840 ALTERNATE A1A, STE. 401  
CITY-ST-ZIP: PALM BEACH GARDENS FL  
 DELETE  
TITLE: P  
NAME: JIMENEZ, SHEILA  
STREET ADDRESS: 9840 ALTERNATE A1A, STE. 401  
CITY-ST-ZIP: PALM BEACH GARDENS FL  
 DELETE  
TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:  
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: Sheila SHERBERT  
1.3 STREET ADDRESS:  
1.4 CITY-ST-ZIP:  
2.1 TITLE:  Change  Addition  
2.2 NAME: Sheila SHERBERT  
2.3 STREET ADDRESS:  
2.4 CITY-ST-ZIP:  
3.1 TITLE:  Change  Addition  
3.2 NAME:  
3.3 STREET ADDRESS:  
3.4 CITY-ST-ZIP:  
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: 800002106558  
6.3 STREET ADDRESS: -03/06/97--01107--031  
6.4 CITY-ST-ZIP: \*\*\*165.00

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: *Sheila Sherbert, Pres* DATE: 1-8-97 Daytime Phone: 601-7751631

CR2E034 (9/96)