SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P92000003576 (5) **DOCUMENT #** SHIEKA, INC. Principal Place of Business Mailing Address 1910 WELLS RD. #1127 1910 WELLS RD. #1127 **ORANGE PARK FL 32073** ORANGE PARK FL 32073 3a. Date of Last Report 3. Date Incorporated or Qualified 11/05/1992 05/01/1995 4. FEI Number Applied For Principal Place of Business Mailing Address 2. 59-3199155 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #. etc. Suite Apt # etc 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 This corporation has liability for intangible tax under s. 199.032 Country Country Zip Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 HARTLEY, DAVID J 350 CROSSING BLVD. #1315 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 83 84 City 85 Zio Code 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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signation typed or pricted have of regiment Lagent and their applicable (NOTE: Bury stored Agent's gradure regarded when reinstating) (3/96) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE DAVID 11 TITLE TITLE HARTLEY, DAVID J CR2E034 1.2 NAME NAME 350 CROSSING BLVD. #1315 13 STREET ADDRESS STREET ADDRESS ORANGE PARK FL 1.4 CITY - \$1 - ZIP CITY-ST-ZIP DECETE 21 TITLE TITLE 'HARTLEY, POONAM 2.2 NAME NAME 350 CROSSING BLVD. 2 3 STHELT ADDRESS STREET ADDRESS ORANGE PARK FL 2 4 City St-ZiP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DEFELE 41 TITLE TITLE 4 2 NAME NAME 4.3 STHEET ADDRESS STREET ADDRESS 4.4 CHTY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CHTY-ST-ZIP \_\_\_ Change \_\_ ] Addit on DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 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)(k). Florida Statutes 1 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

CP