FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000013039 (2)

SHARP PENCILS, INC.

FILED Apr 21 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		***************************************	
2719 S.W. 22		2719 S.W. 22ND AVE.	99 9450		
COCONUT GROVE FL 33133-3158		COCONUT GROVE FL 33133-3158 US		DO NOT WRIT	TE IN THIS SPACE
			3. Date Incorporated or Qualified		
				12/17/1992	
2. Principal P	lace of Nusiness	2a. Maifing Address		4. FEI Number	Applied For
21 3 3	4 CORAL WAY	26 3154 CDI	RAL WAL	/ 65-0375888	Not Applicable
Suiten Apt. 22] ن	# de B	Strice, Apt. #, arc.	3 '	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sign	IAMI FL	City & State	56	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	70	Country.	8. This corporation owes or has p	
21 33145 25 US/A- 20 33145 30 US/A-				Personal Property Tax due Jur	` ~~
	9. Name and Address of Current	Registered Agent		10. Name and Address of New F	
VA	LDIVIA, GEORGE		81 Name		
OTHO CALL DOND AVE				dress (P.O. Box Number is Not Accept	shle)
Mi	AMI FL 33133		0.100(710)		
'			[83]		
			84 City		85 Zip Code
					FL
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes of Florida, Such change was au	s, the above named co	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of changing its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	da Stalûles.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ulucha
SIGNATURE	- Herree Valdie	ria (78019)	VIQUAYS		4119148
12.	Signature typed or project same of registered ages OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	Registered Agent signature req	uired where reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PY	DELETE	1.1 10116	ADDITIONO/CHANGES TO OTT	Change Addition
NAME	VALDIVIA, GEORGE		1.2 NAME		 •
STREET ADDRESS	2719 S.W. 22ND AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		1.4 C(1Y-S1-ZIP		
TITLE	VPS	DELETE	2.1 THILE	TysE B. Schwart	Change Addition
NAME	SCHWARTZ, ILYSE B.		2.2 NAME 7	TUSE B. Schward	Z-VALDIVIA
STREET ADDRESS	2719 SW 22ND AVENUE		2.3 STREET ADDRESS	.70	
CITY-ST-ZIP	COCONUT GROVE FL		2. 4 City - \$1 - ZiP		
TITLE		☐ DELETE	3.1 TALE		☐ Change ☐ Addition
NAME	•		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-7IP		
TITLE		□ DELETE	411110		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T MILLE	4.4 CITY- ST- ZIP		Observation Address
TITLE		L_1 DELETE	5.1 TIPLE		☐ Change ☐ Addition
NAME EXPERT ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY+S1-7/P 6.1 HTLE		Change Addition
NAME .			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby o	certify that the information supplied wil	h this filing does not plaify for	the exemption stated in	n Section 119.07(3)(i), Florida Statutes,	I further certify that the information
indicated officer or Block 12	on this annual report or supplemental director of the corporation of the recei- or Block 13 if changed, or in altho-	anized report is two and accur iver of trustee empoying earth ex hylicht with an addyess	rate and that my signat secute this report as rec	n Section 119.07(3)(i), Florida Statutes, ure shall have the same legal effect as quired by Chapter 607, Florida Statutes	if made under oath; that I am an ; and that my name appears in