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 # 1. Corporation Name SHEW CORP. P93000001434 (8)

001404 (0)

FILED Mar 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				, samten, ten seine (stitl Baitt BB)ti #3titi 83t	er mutar timis andda stift dift 1881
2812 N 34TH AVENUE 2812 N 34TH AVENUE					
HOLLYWOOD FL 33021		HOLLYWOOD FL 33021 US		DO NOT WRITE IN T	HIC COACE
-		00		3. Date Incorporated or Qualified	AIS SPACE
	<u> </u>			01/08/1993	
-	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0385472	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat		City 6 Ctata	····		Fee Required
23	6	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer		1001	10. Name and Address of New Registe	
IAS	SLOVITZ, LAUREN		81 Name		
9520 EAST BROADVIEW			82 Street Add	(DO Banking in Not I am I am	
BAYHARBOR FL 33154			62 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
•			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	12 and 607 1508 Florida Statute	the showen amed corr	paration submits this statement for the number	Co of changing its registered
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.					
4	m lamiliar with, and accept the obliga	ations of, Section 607.0505, Fig.		In North al	11/08
SIGNATURE	Signature, typed or printed name of registered ago		: Registered Agent signature requi	red when reinstating) DA	1 <u>6.70)</u> TE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELET E	1.1 TITLE		Change Addition
NAME	WEISSMAN, STEVEN		1.2 NAME		
STREET ADDRESS	2812 N 34 AVE HOLLYWOOD FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLIWOOD FL		1.4 CITY-ST-ZIP		
TITLE	WEISSMAN, HELEN SINAI	☐ DELETE	2.1 TITLE		Change Addition
NAME	2812 N 34 AVE		2.2 NAME		
STREET ADDRESS	HOLLYWOOD FL		2.3 STREET ADDRESS		İ
CITY-ST-ZIP	HOLLWOODTE	- OFFICE	2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			3.2 NAME		
			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME			4.2 NAME		Change Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - \$T - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	T	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied wi	th this filing does not qualify for		Section 119 07(3)(i) Florida Statutes I further	r cortifu that the information

4. 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.

CHATURE IMM RESERVE

1,200 (054)

(054)963-9710