FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 AM 8:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000018614 (6)**

1. Corporation Name

SHOREWOOD HOLDING CORP.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1901 W CYPRESS CREEK ROAD SUITE 300 FT LAUDERDALE FL 33309	1901 W CYPRESS CREEK ROAD SUITE 300 FT LAUDERDALE FL 33309

3. Date Incorporated or Qualified: **03/09/1993**

3a. Date of Last Report: **03/31/1994**

2. Principal Place of Business	2a. Mailing Address
21 5700 LAKE WORTH ROAD	26 P.O. BOX 5448
Suite, Apt. #, etc. 22 SUITE 310	Suite, Apt. #, etc. 27
City & State 23 LAKE WORTH, FLORIDA	City & State 28 LAKE WORTH, FLORIDA
Zip 24 33463	County 25 PALM BEACH
Zip 29 33466-5448	County 30 PALM BEACH

4. FEI Number: **11-3121438** — 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

9. [illegible] Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LEWIS, RICHARD C
799 BRICKELL PLAZA
SUITE 702
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section [illegible], 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 [illegible], Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title	D	Title	D ☒ Change ☐ Addition
Name	SHAPIRO, ALBERT	Name	SHAPIRO, ALBERT
Street Address	799 BRICKELL AVE #300	Street Address	5700 LAKE WORTH ROAD, SUITE 310
City-State-Zip	MIAMI FL 33131	City-State-Zip	LAKE WORTH, FL 33463
Title	D	Title	D ☒ Change ☐ Addition
Name	SHAPIRO, HONORA	Name	SHAPIRO, HONORA
Street Address	1901 W CYPRESS CREEK RD S300	Street Address	5700 LAKE WORTH ROAD, SUITE 310
City-State-Zip	FT LAUDERDALE FL	City-State-Zip	LAKE WORTH, FL 33463
Title	S	Title	S ☒ Change ☐ Addition
Name	SHAPIRO, HONORA	Name	SHAPIRO, HONORA
Street Address	1901 W CYPRESS CREEK RD S300	Street Address	5700 LAKE WORTH ROAD, SUITE 310
City-State-Zip	FT LAUDERDALE FL	City-State-Zip	LAKE WORTH, FL 33463
Title	SVPT	Title	SVPT ☒ Change ☐ Addition
Name	ROGERS, JAMES M	Name	ROGERS, JAMES M
Street Address	1901 W CYPRESS CREEK RD S300	Street Address	5700 LAKE WORTH ROAD, SUITE 310
City-State-Zip	FT LAUDERDALE FL	City-State-Zip	LAKE WORTH, FL 33463
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	

14. I (we) hereby certify that the information supplied with this filing is absolutely furnished and does not qualify for the exemptions 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 above, or on an attachment with an address.

SIGNATURE: James M Rogers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95 — Date

407-433-0042 — Telephone Number

0217504 CP