

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

FILED

May 05 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000018614 (6)

1. Corporation Name

SHOREWOOD HOLDING CORP.

Principal Place of Business

5600 LAKE WORTH ROAD
SUITE 310
LAKE WORTH FL 33463
US

Mailing Address

P. O. BOX 5448
SUITE 300
LAKE WORTH FL 33466-5448
US

3. Date Incorporated or Qualified

03/09/1993

3a. Date of Last Report

01/24/1996

4. FEI Number

11-3121438

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

JAMES M. ROGERS

82

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

5700 LAKE WORTH ROAD

83

SUITE 310

84

City

LAKE WORTH

FL

85 Zip Code

33463

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

JAMES M. ROGERS

4/18/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME SHAPIRO, ALBERT

STREET ADDRESS 5700 LAKE WORTH ROAD, SUITE 33463

CITY-ST-ZIP LAKE WORTH FL

1.1 TITLE D, P, CEO ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME SHAPIRO, HONORA

STREET ADDRESS 5700 LAKE WORTH ROAD, SUITE 310

CITY-ST-ZIP LAKE WORTH FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE S ☒ DELETE

NAME SHAPIRO, HONORA

STREET ADDRESS 5700 LAKE WORTH ROAD, SUITE 310

CITY-ST-ZIP LAKE WORTH FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE SVPT ☐ DELETE

NAME ROGERS, JAMES M

STREET ADDRESS 5700 LAKE WORTH ROAD, SUITE 310

CITY-ST-ZIP LAKE WORTH FL

4.1 TITLE SVP, S, T ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE VP, AS ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE AVP ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 145.07(3)(b), 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97

(561) 433-0042

CR2E034 (9/96)