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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000051577 (3)

1998 -

FILED Mar 06 1998 8:00am Secretary of State

SHK IN	ESTMENTS, INC.								
Principal Place	of Business	Mailing Ad	idress			· · ·		II 1881 1881	
726 ARTHUR C MIAMI BEACH US		726 ARTHUR GODFREY RD. MIAMI BEACH FL 33140 US					DO NOT WRITE IN THIS SPACE		
05		00					3. Date Incorporated or Qualified		
							07/23/1993		
2. Principal Pia	ace of Business	2a. Mailing	Address					plied For	
21		26					65-0430170 No	ot Applicable	
Suite, Apt. (l, etc.	Suite, Apt. #, etc.					E Continue to at Status Lineared	Additional	
22		27					Fee Ro	equired	
City & State		City & State					6. Election Campaign Financing \$5.00		
23		28					Trust Fund Contribution Added to Fees		
Z _i p	Country Zip				intry		8. This corporation owes or has paid the current year in		
24	[25]	[29]		30	,		Personal Property Tax due June 30. Yes L] No	
	9. Name and Address of Current	Hegistered A	Seur	· · · · · -	81	Name	10. Hame and Address of New Registered Agent		
rosenthal, Kerry E.						Harrio			
2875 NE 191 ST.					82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
STE 500					83				
AVENTURA FL 33180					**]	
					64	City	FL 85 Zip	Code	
74 5	46-1-2070(00		L Clasida Ctatul	loo the o		- namad a	• — I · I · · · · · · · · · · · · · · · ·	e 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.									
SIGNATURE									
Signature, typed or printed name of regulated agent and title if appl			ili (NO		d Age	nt signature rei	pired when reins(ating) DATE		
12.	OFFICERS AND	DIRECTORS	T 55,555	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TITLE	D		☐ DELETE	1.1 Ti			☐ Change	Addition	
NAME	KOVACESKI, KLIME			- 1.2 N					
STREET ADDRESS	726 ARTHUR GODFREY RD	•			1.3 STREET ADDRESS			ļ	
CITY - ST - ZIP	MIAMI BEACH FL			1.4 CITY-ST-ZIP		Phase	Addition		
TATLE	D DELETE			2.1 TITLE		L] Change	FT Monton		
NAME	CELESOVSKI, SLAVE				2.2 NAME				
STREET ADDRESS	726 ARTHUR GODFREY RD.				2.3 STREET ADDRESS				
CITY - ST - ZIP	MIAMI BEACH FL				2. 4 CITY - ST - ZIP		Change	Addition	
! TITLE			-		3.1 TITLE		L Change	L. Addition	
NAME				3.2 N					
STREET ADDRESS			3.3 STREET ADDRESS		·				
CITY - ST - ZIP	Delete			3.4. CITY - \$1 - ZIP		Channa	Addition		
TITLE			☐ DELETE	4.1 To			L_i Change	רייין אטטייוטיו	
NAME				4.21				İ	
STREET ADDRESS						ADDRESS			
City-St-ZiP			DELETE	-	1TY-51	T-ZIP	Change	Addition	
TITLE			DELETE	5.1 T			Clarge	ADDITION	
NAME				5.2 N					
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			DEFETE		ITY-S	1 - ZIP	Change	Addition	
TITLE			☐ DELETE	6.1 T			Change	L. roditoli	
NAME				62 N				1	
STREET ADDRESS						ADDRESS		1	
CITY-ST-ZIP	petity that the information contained will	this files de	oc not ovality	640	IIY 9	tion at a fact	n Section 119.07(3)(i), Florida Statutes. I further certify that the	information	
indicated	on this propulation and application of the propulation of the complemental report of complemental	annual report	ic true and se	irolo	riths	el my signs	bus shall trave the same legal effect as if made under oath; the	at I am an	

indicated on this annual report or suppremental annual report is true and accurate and that my signature enable the same legar effect as it made under oath; that I am a officer or director of the corporation or the receiver or trustee empower of its receiver 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:

2-26.38