

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2004 8:00 am
Secretary of State

01-28-2004 90003 032 ***150.00

DOCUMENT # P93000088196

1. Entity Name -

SHORE INVESTMENT GROUP, INC.



Principal Place of Business

3569 91ST ST. N.
SUITE #4
LAKE PARK FL 33403
US

Mailing Address

3569 91 ST N
SUITE #4
LAKE PARK FL 33403
US

2. Principal Place of Business

631 Shore Road
Suite, Apt. #, etc.

3. Mailing Address

631 Shore Rd.
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

North Palm Beach FL
Zip 33408 Country USA

City & State

North Palm Beach FL
Zip 33408 Country USA

4. FEI Number

65-0456174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICHARD LUCKART C/O LUCKART STUDIOS
3569 91ST STREET N
STE 4
LAKE PARK FL 33403

7. Name and Address of New Registered Agent

Name Richard Luckart

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

631 Shore Road

City North Palm Beach FL Zip Code 33408

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

RICHARD
LUCKART

1/21/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004: Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME LUCKART, RICHARD
STREET ADDRESS 631 SHORE RD
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE DV ☒ Delete
NAME KUEHL, JEFF
STREET ADDRESS 623 NORTHLAKE BLVD.
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE DST ☐ Delete
NAME LUCKART, BARBARA
STREET ADDRESS 631 SHORE RD
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DV ☒ Change ☐ Addition
NAME LUCKART, BARBARA
STREET ADDRESS 631 SHORE ROAD
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara Luckart, Barbara Luckart 1/21/04 (561) 715-6667
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #