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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000026784 (6)

SHEER I	ELEGAN	CE, INC.											
Principal Place	of Busines		Mailing Add	dress				1	T TO ATTENDED THE HANK BIRTH RETTY BOTTO DO)	a b ank 1 880 1 1881	1 3 13) 1001	
816 SE 9TH ST B16 SE 9TH ST								}					
SUITE 202 SUITE 202 DEERFIELD BEACH FL 33441 5680								-					
DEEMPIELD BEI	MUN FL 334	91	DECHLICLD	DENOTI PL W	7771 3000			3.	Date Incorporated or Qualified	3a. D	ate of Last R	eport	
									04/05/1994		/01/1996	·	
2. Principal Pla	ace of Busir	oess	2a. Mailing	2a. Mailing Address					FEI Number		Ap	plied For	
21			26					_	65-0502010			t Applicable	
Suite, Apt. #	f, etc.		├ ──¬	Suite, Apt. #, etc.				6.	Certificate of Status Desired		\$8.75 / Fee Re		
City & State		27 City & S	City & State				+				·		
23			<u> </u>	28				1	Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1		
Zip			Zip			ıntry			This corporation has liability for				
24		25	29		30				Florida Statutes	Yes	□ No		
	9, Name	and Address of Curre	int Registered Ag	ent				10.	Name and Address of New R	egistered	Agent		
		, Kenneth B				81	Name					į	
816 SE 9TH ST						82	Street Addre	ess (P.	ss (P.O. Box Number is Not Acceptable)				
	E 202				83								
DEERFIELD BEACH FL 33441											·		
						84	City			FI	85 Zip I	Code	
11. Pursuant l	o the provis	ions of Sections 607.05	02 and 607.1508,	Florida Statul	tes, the e	bove	-named corpo	oration	n submits this statement for the		of changing it	s registered	
agent. Lar	egistereo ag n familiar wi	ient, or both, in the Stati th, and accept the oblig	e of Florida, Such gations of, Section	change was i 607.0505, Fl	aumonze orida Sta	tutes	r the corporations.	IOFI S D	n submits this statement for the loard of directors. I hereby acce	ptue ap	pomunent as	registered	
SIGNATURE										-2			
Signature, typed or printed name of registered agen; and title if applicable (NOTE 12. OFFICERS AND DIRECTORS						Registered Agent aignature require			reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AN	D DIRECTOR	IS IN 12	
THLE	D	O PRODUCTION		DELETE	1.1 T	ITLE			ADDITIONS/OFFAINGES TO OFFI	OLING AN	Change	Addition	
NAME	DI VENC	ENZO, KENNETH B			1.2 N	AME							
STREET ADDRESS 816 SE 9TH ST SUITE 202			1.			1.3 STREET ADDRESS						Į	
CITY - ST - ZIP		LD BEACH FL 3344				ITY-S	T-ZIP						
TITLE	P	-1130 0004110	1	DELETE	2.1 T						Change	Addition	
NAME		ENZO, ROSALIE			2.2 N								
STREET ADDRESS		9TH ST., SUITE 202 LD BEACH FL					ADDRESS ST-ZIP						
CITY-ST-ZIP TITLE	DELINIE	LD DENOTTE		DELETE	3.17		51-ZIF			·	Change	Addition	
NAME					3.2 N	AME							
STREEL ADDRESS					335	TREET	ADDRESS						
CITY-S1-ZIP			·		3.4.	CITY-S	ST-ZIP					·	
TITLE			l	L DELETE	4.1 7		<u> </u>				L_J Change	Addition	
NAME.						NAME	ADDRESS					i	
STREET ADDRESS					1	HEEL HTY-S						I	
CITY-ST-2IP TITLE				DELETE	5.1 7		11-217				Change	Addition	
NAME					1	IAME							
STREET ADDRESS					5.3 5	FREET	ADDRESS						
CITY-ST-ZIP					_	ATY-S	T-ZIP				·		
TITLE				L DELETE		ITLE					Change	Addition	
NAME					1	IAME			•				
STREET ADDRESS							ADDRESS					į	
14. I do hereb	oy certify tha	I the information suppli	ed with this filing	does not qual	ify for the	exe	mption stated	I in Se	ction 119.07(3)(i), Florida Statut	es. I furth	er certify that	the	
information	n indicated ficer or dire	on this annual report or	supplemental and	nuai réport is trustos empo	true and	accu	urate and that	my sig	gnature shall have the same leg equired by Chapter 607, Florida	al effect a	as if made un	der oath; that	

SIGNATURE

HE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

- 13-97 954 498-1824 Date Desire Phone 9

FILED

Apr 18 1997 8:00am

Secretary of State