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 # P94000062846 (8)

SHANNON G. REX, INC.

Principal Place of Business

Mailing Address

3118 FLORIDA BLVD.. #2058 DELRAY BEACH FL 33444 3118 FLORIDA BLVD., #205B DELRAY BEACH FL 33483-4617

FILED Apr 07 1997 8:00am Secretary of State



			3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996		
2. Principal Prace of Business	2a. Mailing Address		4. FEI Number Applied For		
21 940 Sweetwater Lane	26 940 Sweet	water Lai	Not Applicable		
Suite, Apt. #, etc. 22 3 11	Suite, Apt. #, etc.	11	5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State 23 Boca Raten FL	City & State 28 (30ca Rai	ton, FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,		
24 33431 25	. 1	10	Florida Statutes Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DEV CHANDON C 81 Name					
REX, SHANNON G		or marile			
3118 FLORIDA BLVD., #205B					
DELRAY BEACH FL 33444			83 4 Sweetwater Lane		
		55	# 3 (l		
		84 City	85 Zip Code		
11 December to the greate and Castisma 607 0503	and CO7 1500 Florida Statuton	1 13	corporation submits this statement for the purpose of changing its registered		
office or registered agent, or both, in the State of	and 607. 1508, Florida Statutes l Florida. Such change was au	thorized by the cor	poration's board of directors. I hereby accept the appointment as registered		
agent. I am familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statutes.			
SIGNATURE Signature by painter proceed has all of registured agent.	4.675		e required when reinstating) DATE		
12. OF FICE RS AND		Hegistered Agent signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TILE D	DELETE	1.1 TALE	Change Addition		
NAME REX, SHANNON G	[] been	1.2 NAME	Za orango		
ALLA EL ADIDA BLUD. HANCO			940 SWEETWATER LN #311		
BELDAY BELOUE ANALL		1.3 STREET ADDRESS	Boca Rates FL 33431		
TITLE DELINAY BEAUTH PL 33444	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition		
	L. DELLE	•	Tollarige Abdition		
NAME		2.2 NAME			
STREET ADDRESS		2 3 STREET ADDRESS			
CITY S* ZIP	DELETE	2. 4 CITY - ST - ZIP	Change Addition		
זורננ	ריין מבררוב	3.1 TITLE	L. Change L. Adunton		
NAME:		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CHY-ST-ZIP	T T T T T T T T T T T T T T T T T T T	3.4. CITY - ST - ZIP			
TILE	☐ DELETE	4.1 TITLE	Change Addition		
NAMF		4 2 NAME	·		
STHEEF AUDRESS		4 3 STREET ADDRESS			
CITY-\$1-ZiP		4.4 CITY - ST - ZIP			
Tille	DELETE	5.1 TITLE	Change L. Addition		
NAME		5.2 NAME			
STREET ADORESS		5.3 STREET ADDRESS			
CHY-ST 20F		5.4 CITY - ST - ZIP			
TITLE	☐ DELET E	61 TITLE	Change Addition		
NAME	1 · · · · · · · · · · · · · · · · · · ·	6.2 NAME			
STREET ADDRESS	, ,	6.3 STREET ADDRESS			
City (ST-7IP)		6.4 City - ST - ZIP			
14. Ldo 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		

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/47

(501)750-2217