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



FILED

305 893 760f.

PROFIT CORPORATION ANNUAL REPORT 1997		Secretary	TMENT OF STATE Mortham y of State ORPORATIONS	<u> </u>	Apr 25 1997 8:00am Secretary of State	
1. Corporation	SHOP INC.	082506 (4)				
Principal Place 495-A ESPANO MIAMI BEACH	LA-WAY	Mailing Address 1411 NE 129 ST N MIAMI FL 33161-4457		1 10,5110,63)13 (01.11 01.01)	, 18411 90:01 19119 10001 91111 88416 0111 1001	
1411 DE 1411 DE 1411 DE	41, FL 33161 US	US		3. Date Incorporated or Qualifit 11/10/1994	04/18/1996	
2. Principal Pi	NE 12974 ST.	2a. Mailing Address		4. FEI Number 65-0534171	Applied For Not Applicable	
Suite, Apt.	AMI FL	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		 Election Campaign Financing Trust Fund Contribution 	S \$5.00 May Be Added to Fees	
Zip	161 25 Country WSK	7(p	Country 30	8. This corporation has liability Florida Statutes	for plangible tax under s. 199.032, Yes No	
LITI	9. Name and Address of Current IAN, NEAL S ESQ	Registered Agent	81 Name	10. Name and Address of New	Registered Agent	
ANA O DIVIF LALAY			82 Street	Address (P.O. Box Number is Not Acce	ptable)	
	TE 200 MI FL 33133		83			
MIA	WI FL 33 133		84 City		85 Zip Code	
€ Pureuant	to the provisions of Soctions 607.01.02	and 607 1500 Elevida Statuta		corporation submits this statement for the	FL	
office or re agent. I a	egistered agent, or both, in the State on familiar with, and accept the obligat	if Florida. Such change was a	uthorized by the cor	poration's board of directors. Thereby ac	cept the appointment as registered	
SIGNATURE	Signature, typed or printed havin of replacered agent OFFICERS AND		Hogistered Agonf signature		DATE CONTROL OF THE C	
TITLE	D OFFICERS AND	DELFTE	13.	P	FFICERS AND DIRECTORS IN 12 Change	
NAME	SCHARF, KENNY	•	1.2 NAME	SCHARF KENNY 1411 NE (29TH ST.	`	
STREET ADDRESS CITY-ST-ZIP	1435-A ESPANOLA WAY MIAMI BEACH FL 33139		1.3 STREET ADDRESS 1.4 CHY-ST-ZIP	N. MIAMI, PL 33	lla l	
TITLE	Wa dili Dib totti i E do tob	☐ DELE1E	2.1 TITLE	VP	Change Addition	
NAME			2.2 NAME	MARIA TEREZA SC	CHARF	
STREET ADDRESS CITY-ST-ZIP			2 3 STREET AUDRESS	1411 NE 129TH ST. D.MIAMI, FL 3:	3161	
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME STREET ADDRESS			3 2 NAME			
CITY+ST-ZIP			3.3 STREET ADDRESS 3.4. City - St - ZiP			
TITLE		DELETE	4.1 TOTLE		Change Addition	
NAME STREET ADDRESS			4. 2 NAME			
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 City-St-Zip			
TITLE		DELETE	5.1 1016		☐ Change ☐ Addition	
NAME STREET ADDRESS	•.		5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CHY-ST-ZIP	<u> </u>		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			G.2 NAME			
STREET ADDRESS City-St-Zip			6.3 STREET ADDRESS 6.4 CHTY - ST - ZIP			
14. I do heret	by certify that the information supplied	with this filing does not qualify	for the exemption s	stated in Section 119.07(3)(i). Florida Sta	tutes. I further certify that the	
l am an ol appears i	fficer or director of the corporation or to n Block 12 or Block 13 if charged, or o	pperional annual report is the he receiver or trustee empower on an attachment with a rado	ered to execute this ress.	d that my signature shall have the same report as required by Chapter 607, Florid	da Statutes; and that my name	