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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	SO NE IS	DIVISION O	o oon onvit	ONS				
1. Corporati	On Name		3404 ((5)					
HOS	SE OF SHARON GALLER	RIES, INC.				1 14 B(14 B4 144 15 A14) 2 B1	N ADNA BANK BAND	1 200 (11(1)	:(6)) 35(II) B(2) (8B)
Principal Disc	on of Dunings								
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_ ANNA M	AY BLVD - 10018 46TH, AHIA FL 24216 A070 DENTON, PLOCING 3	P.	O BOX 4070 NNA MARIA FL 24		//2 4/4/4				
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			70.40	v. _j , — 07		 Date Incorporated or Qualifie 02/16/1995 	3a. Date	of Last F	seport
2. Principal F	Place of Business	2a. M	ailing Address			4. FEI Number 65-0356334			Applied For
Suite, Apt	. #, etc.		uite, Apt. #, etc.						Not Applicable Additional
22		27			···	Certificate of Status Desired			Required
City & Sta	te	28	ty & State			Election Campaign Financing Trust Fund Contribution		-	May Be
Zip	Country	Zip	0	Country		8. This corporation has liability			d to Fees
24	25 9. Name and Address of C	29		30		Florida Statutes :	res 🗶 No		103.002,
	9. Name and Address of C	urrent Hegistere	ec Agent	81	Name	10. Name and Address of New	v Registered A	gent	
ROSE	E, PATRICIA								
-509 (BAY BLVD - 10018-4	16TH AVANU	e Wast	82	Street Add	iress (P.O. Box Number is Not Accep	table)		
للظلمان المناطقات	MARIA FL 34216-4070 Be	ADENTAN	E1 244	10 83					
-7414(4)			F - 07F						
		100 417 610	PL 070	\sqcup	City			11 -	
		·		84	' '		FL	11	Code
11. Pursuant	to the provisions of Sections 607	.0502 and 607.15	508, Florida Statut	les, the above-n		ration submits this statement for the			
11. Pursuant or registe familiar w	to the provisions of Sections 607	.0502 and 607.15	508, Florida Statut	les, the above-n		ration submits this statement for the ard of directors. I hereby accept the a			
11. Pursuant or registe familiar w	to the provisions of Sections 607	.0502 and 607.15 Florida. Such ch. Section 607.050	508, Florida Statut ange was authoriz 5, Florida Statutes	les, the above-need by the corpx	named corpor oration's boa	nd of directors, Friereby accept the a	ourpose of chan ppointment as re		
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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 12 or Block 13 if changed, or on an attachment with an address.

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SHARW HALSHEL PORT VIVIAL CHANNE OF SIGNING OFFICER OR DIRECTOR