

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1996				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																																																					
DOCUMENT # P95000027166 (4) 1. Corporation Name SHARIE CONCERT, INC.																																																																																																																																									
Principal Place of Business 190 THIRTEENTH AVE S NAPLES FL 33940 2304 Harrier Run Naples, Fl. 34105		Mailing Address 190 THIRTEENTH AVE S NAPLES FL 33940 P.O. Box 3143 Naples, Fl. 34106																																																																																																																																							
2. Principal Place of Business 21 2304 Harrier Run Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 3143 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 04/03/1995																																																																																																																																					
22 City & State Naples, Fl.		27 City & State Naples, Fl.		4. FEI Number ☒ Applied For ☐ Not Applicable																																																																																																																																					
23 Zip 34105		28 Zip 33939		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																																					
24 Country USA		29 Country USA		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																																					
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No																																																																																																																																									
9. Name and Address of Current Registered Agent GUUDRUN MARIA NICKEL, P.A. 350 FIFTH AVE S SUITE 200 NAPLES FL 33940			10. Name and Address of New Registered Agent 81 Name Susanne Schache 82 Street Address (P.O. Box Number is Not Acceptable) 83 2304 Harrier Run 84 City Naples FL 85 Zip Code 34105																																																																																																																																						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.																																																																																																																																									
SIGNATURE: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____																																																																																																																																									
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>PSD</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>SCHACHE, SUSANNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>190 THIRTEENTH AVE S</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES FL 33940</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VTD</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>SCHACHE, HANS-JURGEN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>190 THIRTEENTH AVE S</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES FL 33940</td> <td></td> </tr> <tr> <td>TITLE</td> <td>CEO / President</td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td>Susanne Schache</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2304 Harrier Run</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Naples, Fl. 34105</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	PSD	☒ DELETE	NAME	SCHACHE, SUSANNE		STREET ADDRESS	190 THIRTEENTH AVE S		CITY-ST-ZIP	NAPLES FL 33940		TITLE	VTD	☒ DELETE	NAME	SCHACHE, HANS-JURGEN		STREET ADDRESS	190 THIRTEENTH AVE S		CITY-ST-ZIP	NAPLES FL 33940		TITLE	CEO / President	☐ DELETE	NAME	Susanne Schache		STREET ADDRESS	2304 Harrier Run		CITY-ST-ZIP	Naples, Fl. 34105		TITLE		☐ DELETE	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ DELETE	NAME			STREET ADDRESS			CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>CEO / President</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>Susanne Schache</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>2304 Harrier Run</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td>Naples, Fl. 34105</td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>2.1 TITLE</td> <td></td> <td></td> </tr> <tr> <td>2.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td></td> <td></td> </tr> <tr> <td>3.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			1.1 TITLE	CEO / President	☒ Change ☐ Addition	1.2 NAME	Susanne Schache		1.3 STREET ADDRESS	2304 Harrier Run		1.4 CITY-ST-ZIP	Naples, Fl. 34105	☐ Change ☐ Addition	2.1 TITLE			2.2 NAME			2.3 STREET ADDRESS			2.4 CITY-ST-ZIP			3.1 TITLE			3.2 NAME			3.3 STREET ADDRESS			3.4 CITY-ST-ZIP			4.1 TITLE		☐ Change ☐ Addition	4.2 NAME			4.3 STREET ADDRESS			4.4 CITY-ST-ZIP			5.1 TITLE		☐ Change ☐ Addition	5.2 NAME			5.3 STREET ADDRESS			5.4 CITY-ST-ZIP			6.1 TITLE		☐ Change ☐ Addition	6.2 NAME			6.3 STREET ADDRESS			6.4 CITY-ST-ZIP		
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.																																																																																																																																									
SIGNATURE: _____ SCHACHE 04-26-96 941 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SCHACHE 03-15-01 (941) 571-4866																																																																																																																																									

REINSTATEMENT 1997-01

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***1350.00 ***1350.00

M.W

**Sharee Concert Inc.
c/o Susanne Schache
2304 Harrier Run
Naples, FL 34105**

03 - 15 - 01

RE: Document # P 95000027166

Dear Ladies and Gentlemen:

After talking to you yesterday, I would like to reinstate Sharee Concert Inc. immediately.

The fees that occur are \$ 1,350.00 from the time the Corporation was dissolved up to today.

Enclosed please find a check for the amount due.
Please send me the documents for the reinstatement.

Thank you, sincerely

A handwritten signature in cursive script, appearing to read 'Schache', written in black ink.

**Susanne Schache
CEO Sharee Conert Inc.**