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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P95000061411
1 Corporation Name	1 00000001111

1. Corporation	n Name	001411				
SHERE I	INVESTMENTS, INC.					r 1
					ı mayladı biğ ibini oldığındığı bağı başı av	ila disas mamananan masman masman
Principal Plac	e of Business	Mailing Address			A LANGUAGUE UND INION NITHE BRAINE WESTER BR	LINN MEINDE EINDEN MINNN LINNE INNN 1800
10921 S.W. 93F	RD AVENUE	10921 S.W. 93RD AVENU	E			
MIAMI FL 33170	6	MIAMI FL 33176				
					DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualifed	
a Principal D	lace of Business	2a, Mading Address			08/08/1995	1 14
21	lace of bosiness	26			65-0604703	Applied For Not Applicable
Suite, Apt	#, etc	Suite Apt #, etc				\$8.75 Additional
22		27			5. Certificate of Status Desired []	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Countr	У	8. This corporation owes the current year	Intangible
24	25	29	[30]		Personal Property Tax	L l Y es □ INo
	9. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registere	d Agent
CUB	PORATION SERVICE COMPANY		81	Name		
	HAYS STREET		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
	AHASSEE FL 32301-2525			.]		
	2 11 .0 000 1 1 0000 1 0000		83	']		
			84	City		85 Zip Code
44 Bussiant	to the provisions of Costinue COV 0503	Louis EGS 4EAR Flation Care			F	L
office or r	egistered agent, or both, in the State c	of Florida, Such change was	authorized by	the corporation	oration submets this statement for the purpose on's board of directors. Thereby accept the app	nointment as registered
	m familiar with, and accept the obligati	ions of, Section 607,0505, FI	lorida Statutes	S		İ
SIGNATURE	Signature, typed or printed coole of registered agost	land to entaggit above (NCII	t Rejstered Ape	at Signation region	twice most account to the first term of the firs	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	I DELETE	11100	S	teven share	[48riange [] Addition
NAME	SHERE, STEVEN		1.2 NAME	%	Lolowy Apartments	
STREET ADDRESS	10921 S.W. 93RD AVE.		13STREE	TADORESS	9355 SW771AIL	
CITY-ST-ZIF	MIAMI FL 33176		14 CP Y-5	81 Zir	MIAMI, FIA 33156	,
TITLE		[] Detele	2.1.1171.6		70000276	[] Change [] Addion
NAME			2.2 NAS/E		ሳን ለፀፅ /ሰዓ 	-01046012
STREET ADDRESS			2.3 STREE	LATORESS	-nzzuazaan ****150.86	
CITY-ST-ZIP		() nevere	2 4 CiT 1 -	\$1-76	ককক (১) (, ১)	
TITLE		[] DELETE	3111116			[Change [Addition
NAME			3.2 NAME			
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP TITLE		[] DELETE	34 OID :	51-21-1		[Change
NAME		i i Dett i E	4.1 IIIEF 4.2 NAME			[] Change [] Moulton
STREET ADORESS				1 ADDRESS		
CITY-ST-ZIP			4.4 CiTY-S			
TITLE		Elbecere	4.4 CHY-S 5 1 Ti*LF	11 Z#		[!Change
NAME		.,	5.2 NAM:			F
STREET ADDRESS			E .	TADDRESS		
CITY-ST-ZIP			5.4 CI*1 - 5	1 - ZIF		^
TITLE		[]pele16	6 1 111 <u>1</u> 6			[Change Addition
NAME			E 2 NAME			NO M
STREET ADDRESS			63STREE	LADDRESS.		751

14. Thereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplientental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the reteiver or trusted 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 altra-riment with an address, with all other like empowered.

64 CU1 57 ZIF

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/91

395-270-9436