

58-91 B 6693 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000065126 (1)**

1. Corporation Name
SEA SHELL CONSTRUCTION, INC.

Principal Place of Business
**2525 NW 95TH TERR.
CORAL SPRINGS FL 33065**

Mailing Address
**2525 NW 95TH TERR.
CORAL SPRINGS FL 33065-4947**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/21/1995		3a. Date of Last Report 07/01/1996	
21 Suite, Apt. #, etc. #501/521		26 2525 NW 95TH Terr		4. FEI Number 65-0808445		Applied For <input type="checkbox"/> Not Applicable	
22 City & State Coral Springs, FL		27 City & State Coral Springs, FL		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23 Zip 33065		28 Zip 33065		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24 Country USA		29 Country USA		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent PARCOVER, ELRINA 2525 NW 95TH TERR CORAL SPRINGS FL 33065				10. Name and Address of New Registered Agent			
				81 Name Elrina Reilly			
				82 Street Address (P.O. Box Number is Not Acceptable) 2525 NW 95th Terr.			
				83			
				84 City Coral Springs FL 85 Zip Code 33065			
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 Elrina Reilly				DATE 4/30/97			
Signature, typed or printed name of registered agent and title, if applicable.				(NOTE: Registered Agent signature required when reinstating)			

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME REILLY, KEVIN		12 NAME	
STREET ADDRESS 2525 NW 95TH TERR		13 STREET ADDRESS	
CITY-ST-ZIP CORAL SPRINGS FL		14 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PARCOVER, ELRINA		22 NAME	VP Reilly, Elrina
STREET ADDRESS 2525 NW 95TH TERR		23 STREET ADDRESS	2525 NW 95th Terr
CITY-ST-ZIP CORAL SPRINGS FL		24 CITY-ST-ZIP	Coral Springs, FL
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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 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: **Elrina Reilly** **Elrina Reilly VP** **4/30/97**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)