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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000070806 (1) DOCUMENT #
1. Corporation Name

SHREEVE ENTERPRISES, INC.



EURODAL ERACE	of Business		Mailing Address					ii maii maii deli deli i		*** ***** **** ****
350 GULF BL			350 GULF BLVD	1						
	S BEACH FL 34635		INDIAN ROCKS		35					
							3. Date incorporated or Qua 09/11/1995		te of Last	Report
2. Principal Pla			2a. Mailing Addres	3S			4. FEI Number		<u>, </u>	Applied For
21 14/1	6 U.S. Hw	14 19	26				57-3368	2/0		Not Applicable
	t, etc.	,	Suite, Apt. #, 6	etc.			5. Certificate of Status Desire	ed []	\$8.7	5 Additional
22 /4			27				Softmode of Oldros Desire		Fee	Required
City & State			City & State				6. Election Campaign Finance	ing 🗀	\$5.	00 May Be
Zip Zip			28				Trust Fund Contribution			ed to Fees
3464	67 25 PM		Zip		ountry		8. This corporation has liability		tax under	s 199.032,
24 77 2	9. Name and Addre	ovo	29 Registered Agent	30	T			Yes No		
	o, Hume una Addre	os or current	negratered Agent		81	Name	10. Name and Address of N	iew Hegistered	Agent	
WEYLIE	WALLACE J				["	Harric				
350 GUL					82	Street Address (P.O. Box Number is Not Acceptable)				
	F BLVD ROCKS BEACH FL 3	4625			83					
HADIAH I	100NO DEMORITE 3	4000			63					
					84	City			85 2	Pip Code
44 Durament to	the condeine of Cost	607 0500	-1007.4500 51 11					<u>Fl</u>	<u>- </u>	
or registere	ed agent, or both, in the	State of Florida	rio 607.1508, Florida i . Such change was au	Statutes, the ab uthorized by the	oove-na corpor	med corpor ation's boar	ration submits this statement for the rd of directors. I hereby accept the	ne purpose of ch e appointment a	ianging its s registere	registered office
familiar with	n, and accept the obliga	ations of, Section	n 607.0505, Florida St	atutes.	,	4		о аррынный и	o rogistore	a agont rum
CIONIATUDE										
	Signature, typed or printed name					gnature required	id when reinstating)	DATE		
12.		of registered agent and DFFICERS AND [DIRECTORS	13.		sgnature required	d when reinstating) ADDITIONS/CHANGES TO	OFFICERS AN		
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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.

SIGNATURE: AND REW ELLIOTT 04/24/96 813-869-8304