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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000002934 (3)

1. Corporation Name
SHAWN R. MAESEL, INC.



Principal Place of Business
800 N.E. SPANISH RIVER BLVD.
#28A
BOCA RATON FL 33431

Mailing Address
500 N.E. SPANISH RIVER BLVD.
#28A
BOCA RATON FL 33431-4515

3. Date Incorporated or Qualified
01/09/1996

3a. Date of Last Report

2. Principal Place of Business
21 100 N.W. 28TH ST

2a. Mailing Address
26 P.O. BOX 4001

4. FEI Number
65-0653480

Applied For
Not Applicable

Suite, Apt. #, etc.
22 B-3

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State
23 BOCA RATON, FL.

City & State
28 BOCA RATON, FL.

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip
24 33431

Country
25 USA

Zip
29 33429

Country
30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAESEL, SHAWN R
500 N.E.SPANISH RIVER BLVD.
#28A
BOCA RATON FL 33431

81 Name
PETER A. HICKEY

82 Street Address (P.O. Box Number is Not Acceptable)
100 N.W. 28TH ST B-3

83

84 City
BOCA RATON

FL

85 Zip Code
33431

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

Signature, typed or printed name of registered agent and date if applicable

PETER A. HICKEY

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
D MAESEL, SHAWN R
STREET ADDRESS
500 N.E. SPANISH RIVER BLVD. #28A
CITY-ST-ZIP
BOCA RATON FL 33431

1.1 TITLE
12 NAME
P/D
MAESEL, SHAWN ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.2 TITLE
2.1 TITLE
2.2 NAME ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
V/T/D
PETER A. HICKEY
100 N.W. 28TH ST B-3
BOCA RATON, FL. 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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.

CR2E034 (9/96)