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PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000002934 (3)

SHAWN R. MAESEL, INC.

FILED Feb 13 1998 8:00am Secretary of State



de len

| Principal Place of Business Mailing Address | | | | | | i Beili deilo kelo leleb | , liller brør (D#: |
|---|--|---------------------------------------|--------------------|--------------------|--|--------------------------|--------------------|
| • | | Mailing Address | | | | | |
| 100 NW 28TH ST P.O. BOX 4001 B-3 BOCA RATON FL 33429 | | | | | | | |
| BOCA RATON FL 33431 | | US | , | | DO NOT WRITE IN THIS SPACE | | |
| US | | | | | 3. Date Incorporated or Qualified 01/09/1996 | | |
| 2. Principa | al Place of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | 65-0653480 | ——— | Not Applicable |
| Suite, Ap | Apt. #, etc. Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 Additional | |
| City & S | itate | City & State | | | 6. Election Campaign Financing | | |
| 3 | | 28 | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | |
| Zip | Country | Zip | Country | , | 8. This corporation owes or has paid | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 3 | | ☐ No |
| | 9. Name and Address of Cu | rrent Registered Agent | | | 10. Name and Address of New Reg | Istered Agent | |
| | HICKEY, PETER | | 81 | Name | | | |
| | 100 NW 28TH ST B-3 BOCA RATON FL 33431 | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable | ə) | |
| | | | 83 | | | | |
| | | | 84 | City | | FL B5 Zij | p Code |
| 11. Pursua | nt to the provisions of Sections 607. | 0502 and 607.1508, Florida Statu | ites, the abov | e-named cor | poration submits this statement for the pu | roose of changing | its registered |
| DINGE | or registered agent, or both, in the S I am familiar with, and accept the o | iale of Florida. Such change was | authorized by | v the corpora | ttion's board of directors. I hereby accept | the appointment a | s registered |
| • | • | brigations of, decitor dov. 3000, 11 | ionas Statate | 5, | | | |
| SIGNATURI | Signature, typed or printed name of registerer | d agent and title if applicable. (NO | TE: Registered Age | enl signalure requ | ired when reinstating) | DATE | |
| 12. | | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICE | RS AND DIRECTO | ORS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 THTLE | | | ☐ Change | Addition |
| NAME | MAESEL, SHAWN | | 1.2 NAME | | | | |
| STREET ADDRES | | BLVD. #28A | 1.3 STREET | ADDRESS | | | |
| CITY - ST- ZIP | BOCA RATON FL | | 1.4 CITY - S | iT - ZIP | | | |
| TITLE | VID | DELETE | 2.1 TITLE | | | Change | : Addition |
| NAME | HICKEY, PETER | | 2.2 NAME | | | | |
| STREET ADDRES | | | 2.3 STHEET | ADDRESS | | | |
| CITY-ST-ZIP | BOCA RATON FL | | 2. 4 CITY - 1 | ST - ZIP | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | • | Change | Addition |
| NAME | | | 3.2 NAME | | | | |
| STREET ADORES | s | | 3.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4 CITY-5 | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADORES! | s | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | · · · · · · · · · · · · · · · · · · · | 4.4 CiTY-S | T - ZIP | | | |
| TITLE | | ☐ DELETE | 51 TITLE | | | ☐ Change | Addition |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | s | | 5.3 STREET | address | | | |
| CITY-ST-ZIP | | | 5.4 CITY - S | T - ZIP | | | |
| TITLE | 1 | ☐ DELETE | 6.1 TITLE | | | Change | Addition |
| NAME | 1: | | 6.2 NAME | | | | |
| STREET ADDRESS | s | | 6.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY - S | | | | |
| indicate | ed on this annual renord or subpleme | ental andual reporties true and acc | curate and tha | al mv signatu | Section 119.07(3)(I), Fiorida Statutes. I fur ire shall have the same logal effect as if ru uired by Chapter 607, Florida Statutes; ar | sade under oath: t) | hat Lam an |