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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

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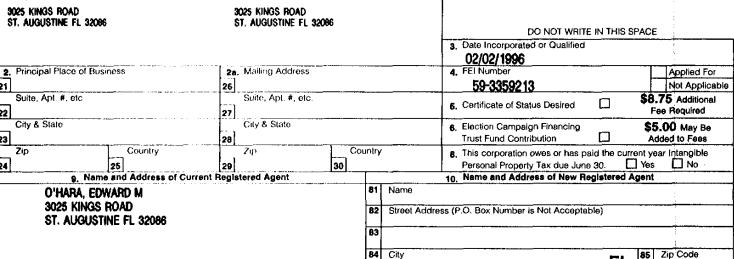
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DOCUMENT # P96000010707 (3)

LONE SHARK, INC.

Principal Place of Business Mailing Address 3025 KINGS ROAD 3025 KINGS ROAD ST. AUGUSTINE FL 32086 ST. AUGUSTINE FL 32086

FILED Feb 12 1998 8:00am Secretary of State



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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the objections of, Section 607.0505, Florida Statutes.			
SIGNATURE	Mund M offare - PRESIDENT		1/21/48
Egging by first or in the strain of regard and title of appealments (NOTE: Rog stored Agent signature required when reinstating) DATE			
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DECETE	1 1 TITLE	Change Addition
NAME	O'HARA, EDWARD M	1.2 NAME	
STREET ADDRESS	3025 KINGS ROAD	1.3 STREET ADDRESS	:
CITY-ST-ZIP	ST. AUGUSTINE FL 32088	1.4 CITY - ST - ZIP	
TITLE	VD DELETE	2 1 TITLE	Change Addition
NAME	O'HARA, ELIZABETH G	2.2 NAME	
STREET ADDRESS	3025 KINGS ROAD	2.3 STREET ADDRESS	1 1
CITY-ST-ZIP	ST. AUGUSTINE FL 32088	2 4 CITY-ST-ZIP	
TITLE	STD DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	O'HARA, SALLIE L	3 2 NAME	
STREET ADDRESS	3025 KINGS ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32086	3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	: · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<u></u>
TITLE	DELETE	51 TITLE	Change Addition
NAME		5 2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	:
CITY - ST - ZIP		5.4 CITY - ST - ZIP	<u></u>
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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14. Thereby 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 13 if changed, or on an attrichment with an address.

SIGNATURE: Sallie L. O'Han

SALUE L. O'HARA + SECRETARY TREASURER

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