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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000021199 (0)

THE BIRD SHOP, INC.

.....

FILED Apr 04 1997 8:00am Secretary of State



Principal Place	or Husiness	Mailing Address					,		
140 E BAHAMA WINTER SPRIN		140 E BAHAMA ROAD WINTER SPRINGS FL :							
					3. Date Incorporated or Qualified 03/01/1996	3a. Date	e of Last F	Report	
	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
	1667 S. Hwy. 17-92 26				59-336486	68	Nr	ot Applicabl	
Suite Apt. # etc.		Suite, Apt #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State City & State				11 11 15, ,,,,	6. Election Campaign Financing	W	\$5.00 May Be		
Jongwood, FL 28					Trust Fund Contribution		Added to Fees		
Zip Country 25 U.S.A.		2ip 29	Country 30		8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No			199.032,	
	Name and Address of Currer	nt Registered Agent	8	Name	10. Name and Address of New R	egistered A	gent		
STO	STOKES, JOHN D								
140 E BAHAMA ROAD WINTER SPRINGS FL 32708			82 Street Ad		Address (P.O. Box Number is Not Accepta	ble)			
			8:	3				***************************************	
			84	City		FL	85 Zip	Code	
SIGNATURE .	Soyuman Periodic programme chagistered ag	ent and title if applicable. (ID DIRECTORS	NOTE: Registered A	gent signature	required when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND I	DIRECTOL	RS IN 12	
11116	D	DELETE	1.1 TUTLE		PD		Change	Additio	
NAME.	STOKES, JOHN D		1.2 NAME		· ·	_			
STREET ADDRESS	140 E BAHAMA ROAD			T ADDRESS					
Q1 r - S1 - ZIP	WINTER SPRINGS FL 32708		1.4 CITY~	ST-ZIP					
TITLE	D	DELETE	2.1 TITLE		STD	5	Change	Additio	
NAME	Manning, Vernon L		2.2 NAME		•				
STREET ADORESS	140 E BAHAMA ROAD		2.3 STREE	T ADDRESS					
CITY-ST ZIP	WINTER SPRINGS FL 32708		2. 4 CITY			···			
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NAME			3 2 NAME						
STREET ADDRESS				T ADDRESS	:				
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NAME		[] Detele	4.3 TITLE 4.2 NAM				→ Augustic	الله من	
SUBERT ADDRESS				T ADDRESS					
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MAME			5.2 NAME						
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SHY 51-200			5.4 CITY -	ST - ZIP					
1-1LF		☐ DELETE	6.1 TITLE			ľ	Change	Additi	
NAME			6.2 NAME						
STREET ACORESS			63 STREE	T ADDRESS					
CHTY-ST ZVP			6 4 CITY-	ST-ZIP					

14. Ido 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

GNATURE AND TYPED ON PHINTED NAME OF SIGNING OFFICER ON DIRECTOR MANNING 03/30/97 40