**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000025095 (6)

SHREE, INC.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

**APPROVED** AND FILED

1997 JUL 29 PM 2: 54

SECRETARY OF STATE TALLAHASSEE, FLORIOA

Principal Place of Business Mailing Address				I (BBIIDBI IID IDIID UTIIS UDIN DUN	##
1104 S DIXIE HIGHWAY 1104 S DIXIE HIGHWAY LAKE WORTH FL 33460 LAKE WORTH FL 33460					
					E IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
				03/15/1996	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1404. Lucern Me 28 1104. S. Dlais			e higuag	65.0653329	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	• 0	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 La14	2. Worth FL 33460	28 Lake wort	L FL 3346	Trust Fund Contribution	☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has p	aid the current year Intangible
24 334	60 25 Palm-beach	29 33460 3	o Pelm beach		
<del></del>	9. Name and Address of Current			10. Name and Address of New R	egistered Agent
PAIEL MARIEORIUMAR			81 Name	Same	
1104 S DIXIE HIGHWAY LAKE WORTH FL 33460			82 Street Add	ress (P.O. Box Number is Not Accepte	ible)
			83		
			84 City		FL 85 Zip Code
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 M.S. PATU 7-23-17					
DIGITITION.E	Signature, typed or printed name of registered ager		Registered Agent signature requ		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE	President	DELETE	1.1 TITLE		Change Addition
NAME		tely	1.2 NAME		
STREET ADDRESS	1164. S. DIKIC hig	way	1.3 STREET ADDRESS		
CITY-ST-ZIP	Lake worth of 3	3460	1.4 CITY - ST - ZIP		
TATLE	SECHERT	DELETE	2.1 1\ftLE	1000022	Shange Addition
NAME	Amistel Part		2.2 NAME	_09/n4/	25665 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STREET ADDRESS	1100 5 Dia C	higway	2.3 STREET ADDRESS	007 077 *****10	5.00 ****165.00
CITY-ST-ZIP	1 alce 4002-16	FL 33460	2, 4 CITY- \$1 - ZIP	####TU	0.00 ******200.00
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		İ
			3.4. CITY-ST-ZIP		İ
CITY-ST-ZIP		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
1 17-11-5			4.3 STREET ADDRESS		
STREET ADDRESS					İ
CITY-ST-ZIP			4 CITY-ST-ZIP		i

6.4 CITY - \$1 - ZIP 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 13 if changed, or on an attachment with an address. (551)

TITLE

NAME

6.5 TITLE

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS

4 CITY - ST - ZIP

DELETE

DELETE

Addition

Change

7-23,97,

To: Department of state.

Fee In Feb- 97- But the Information of Pepoet IN Block 12- was Not Field, so Department Tay To send me Back IN march with my check, which mail I have not Received- Thaths why I am late to File this Repost
So please Accept my \$165.2.

Thank you probed

pre!

SHREE ZNC