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PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
97 JAN 28 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000034183 (9)**

1. Corporation Name
SHELBY DEVELOPMENTS, INC.

Principal Place of Business
19105 N.E. 21ST AVENUE
NORTH MIAMI FL 33179

Mailing Address
19105 N.E. 21ST AVENUE
NORTH MIAMI FL 33179-4340

3. Date Incorporated or Qualified: **04/18/1996**
3a. Date of Last Report:

2. Principal Place of Business
21 9050 Pines Boulevard
Suite, Apt. #, etc.
22 Suite 250
City & State
23 Pembroke Pines, FL
Zip 24 33024 Country 25 USA

2a. Mailing Address
26 9050 Pines Boulevard
Suite, Apt. #, etc.
27 Suite 250
City & State
28 Pembroke Pines, FL
Zip 29 33024 Country 30 USA

4. FEI Number: **65-0663432** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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

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

9. Name and Address of Current Registered Agent
SIMON, ERIC A
750 S.E. 3RD AVENUE, SUITE 100
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent
81 Name: Simon, Eric A
82 Street Address (P.O. Box Number is Not Acceptable): 9050 Pines Blvd.
83 Suite 250
84 City: Pembroke Pines FL 85 Zip Code: 33024

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: Eric A Simon (NOTE: Registered Agent's signature required when reinstating) DATE: 1/26/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHELLEY, ROBERT 19105 N.E. 21ST AVENUE NORTH MIAMI FL 33179 ☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	President/D Shelley, Robert 9050 Pines Blvd., Suite 250 Pembroke Pines, FL 33024 ☐ Change ☒ Addition
	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP/Secretary/D Simon, Eric A 9050 Pines Blvd., Suite 250 Pembroke Pines, FL 33024 ☐ Change ☒ Addition
	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Vice President/T/D Myerson, Joseph 9050 Pines Blvd., Suite 250 Pembroke Pines, FL 33024 ☐ Change ☒ Addition
	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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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.

SIGNATURE: Eric A Simon 1/26/97 954-437-7100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #