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FILED  
May 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000046791 (5)

1. Corporation Name  
SHARKMART, INC.

Principal Place of Business  
333 17TH STREET, SUITE V  
VERO BEACH FL 32980

Mailing Address  
333 17TH STREET, SUITE V  
VERO BEACH FL 32980-5687



3. Date Incorporated or Qualified  
05/28/1996

3a. Date of Last Report

21. Principal Place of Business  
9490 90th Ave  
Suite, Apt. #, etc.

2a. Mailing Address  
9490 90th Ave  
Suite, Apt. #, etc.

4. FEI Number  
65-0674583

Applied For  
Not Applicable

22. City & State  
VERO BEACH, FL  
23. Zip  
32967  
25. Country

27. City & State  
VERO BEACH FL  
28. Zip  
32967  
29. Country

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

10. Name and Address of New Registered Agent

MCHUGH, JOHN J JR.  
333 17TH STREET, SUITE U  
VERO BEACH FL 32980

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. Zip Code  
FL

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
1. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D BRYANT, DENNIS A  
1110 OLD DIXIE, SUITE A-7  
VERO BEACH FL 32980  
2. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D BRYANT, KATHY L  
1110 OLD DIXIE, SUITE A-7  
VERO BEACH FL 32980  
3. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
4. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
5. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
6. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: 17 APR 97  
Daytime Phone: (609) 551-4426

CR2E034 (9/96)