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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name P96000084757 (9)

SABRINA'S GIFTS INC.

## **FILED** May 19 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				ar inter hinte that a	1111 1891 1991
1556 PATRICIA AVENUE 1556 PATRICIA AVENUE							
DUNEDIN FL	34698	DUNEDIN FL 34698			DO NOT WRITE IN 1	THIS SPACE	
					3. Date Incorporated or Qualified	1110017102	
					10/11/1996		
2. Principal P	lace of Business	2a. Mailing Address		1	4. FEI Number		pplied For
21 1709	Muin Street	26 1709 Main	, 5tr	ee x	59-3406587	<del>   </del>	ot Applicable
Suite, Apt,	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
ļ <del></del> 1	e 15	27 Suite 15			5. Certificate of Status Desired	Fee R	equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 DME	din, Florida	28 Dunedin F/	urion		Trust Fund Contribution	Added	to Fees
Zip ///	98 25 USA	7ip 7	Country (1/2)	2	8. This corporation owes or has paid the		
24 376	9. Name and Address of Curren		30 V S	77	Personal Property Tax due June 30.  10. Name and Address of New Registe		No
		i negistered Agent	81	Name #	10. Name and Address of New Hegiste	леа Agent	
	DRIGUEZ, MICHAEL			//	rooney L Shrove		
	56 PATRICIA AVENUE		82	Street Ac	doress (P.O. Box Number is Not Acceptable)	16	
100	NEDIN FL 34698		83	120	Muin Strect - Svite	12	
1				501	te 15		
	•		84	City D	unedia	FL 85 Zip	Code
11. Pursuant	to the provisions on Sections 607 050:	2 and 607 1508. Florida Statutes	s the above	e-named co	proporation submits this statement for the purpo	rse of changing i	ts registered
office or re	egistered agont, of both, in the state	of Florida. Such change was au	thorized by	the corpor	orporation submits this statement for the purporation's board of directors. I hereby accept the	appointment as	registered
		HOLE OF SECTION OUT USUS, FIGE	ida Siaiulei	S.	April 0	24 199	<i>5</i>   >
SIGNATURE	Signature typed or pp ited name of registered age	of and title if applicable (NOTE)	Registered Age	ont signature red	guired when reinstating)	ATE /	<u> </u>
12.	OFFICERS AND	DIRECTORS /	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 THILE	~	Shrude, Rudney L - Secretur 709 main Street - Svite		Addition
NAME	RODRIGUEZ, MICHAEL E		1.2 NAME	1	709 ingin street - Svite	15	
STREET ADDRESS	1556 PATRICIA AVENUE		1.3 STREET	ADDRESS	Ornedia, FL 34698		
CITY-ST-ZIP	<u>DUNEDIN FL</u>		1.4 CITY - S	1-2IP	Done 011, 1 C 37618		
TITLE		☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE1	ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		2. 4 CITY -	ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET				
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TITLE		☐ DĒLĒTE	4.1 TITLE	-		L Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	į			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CiTY-S	I - ZIP		Change	Addition
			5 1 TITLE			Change	Addition
NAME expect appoint			5.2 NAME	I DDDGGG			
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S 6.1 TITLE	1 - ZiP		Change	Addition
NAME		□ pttrit	6.2 NAME			L Criange	☐ ¥0000001
STREET ADDRESS				ADDRECO			
			6.3 STREET				
CITY-ST-ZIP	ertify that the information supplied wi	th this filing does not qualify for	6.4 City-S		in Section 119 07(3Vi), Florida Statutos, Liudh	or cortifu that the	information

Indicated on this annual report or suppliemental 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 the address.

1/2/1 71/16/00 (012) 722 779/1