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

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000091983 (2) SHIRLEY D. HALL, INC.								
Principal Place of Business 14798 S.W. 184TH STREET MIAMI FL 33187			Mailing Address 14798 S.W. 184TH STREET MIAM! FL 33187-1724				T (CORPORATION CONTINUES AND C	
							3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1996	
<b>⊢</b> `	ace of Business	2a. Ma	2a. Mailing Address				4. FEI Number Applied For	
Suite, Apt.	w ato	26				<del></del>	65-0721537 Not Applicable	
22 Suite, Apt. 1	#, etc.	27	Suite, Apl. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	9		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zıp:	)		untry		8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29		30]			Florida Statutes Yes . No	
	9. Name and Address of Currer	n Hegistere	o Agent		81	Name	10. Name and Address of New Registered Agent	
- 1479	L, Shirley D 98 S.W. 184th Street Mi Fl. 33187						Address (P.O. Box Number is Not Acceptable)	
•					84	City	FL 85 Zip Code	
SIGNATURE .	to the provisions of Sections 607,050 egistered agent, or both, in the State or familiar with, and accept the oblight Signature, typed or preced page of registered agent.						corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered required when religibling)	
12.*,	OFFICERS AN	D DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D CHOICA D		☐ DELF1€	117		-	Change Addition	
NAME	HALL, SHIRLEY D 14798 S.W. 184TH STREET			121				
STREET ADDRESS	MIAMI FL 33187					ADDRESS		
CITY-ST-ZIP TITLE	MILITANI I E GO 107		DELETE	$\frac{140}{211}$	CITY S	1 - 201,	Change Addition	
NAME				•	IAME	ĺ	J Claring C 100 months	
STREET ADDRESS						ADORESS	j	
CITY-ST-ZIP				2.4	CITY - S	1 - ZIP		
TOTLE			DELETE	3.1	HILE		Change Addition	
NAME				3.21	(AME			
STREET ADDRESS				3.3 \$	STREET	ADDRESS		
CITY-ST-ZIP					CITY-S	1 - 7sP		
TITLE			DETETE	4.11			☐ Change ☐ Addition	
NAME					NAME			
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP TITLE			DELETE	5.1 1	OTY - SI	1-20	Change Addition	
NAME	•		LLD Pression	521			Change 17 Addition	
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP					HTY-S1	- 1		
TITLE			DELETE	611			Change Addition	
NAME				6.21	IAME		)	
STREET ADDRESS				6.3 9	STREET.	ADDRESS	/	
CITY-\$T-7IP				610	'HV. \$1	I-7IP	/	

14. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119/17/3)(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 flight 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.

**FILED** 

Mar 19 1997 8:00am

Secretary of State