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PROFIT : CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000093795

SHOALS, INC.

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90047 021 ***150.00



	<u> </u>						AN ISHIS INDI		
Principal Place	of Business	Mailing Address							
1017 - 43RD STREET SOUTH 4017 - 43RD STREET SOUTH									
ST. PETERSBURG FL 33711 ST. PETERSBURG FL 33711						DO NOT WRITE IN THIS SPACE			
					•	3. Date Incorporated or Qualifed			i
•						11/15/1996			l
	3-44-E					1 // 13/ 1990 4 FEI Number		pplied For	
2. Principal Pl	ace of Business	2a. Mailing Addres	ss			l **			Ü
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Suite, Apt. i	#, etc.	Suite, Apt. #, e	tc.			5. Certificate of Status Desired	•	Additional equired	ĺ
12		27				•			ł
City & State		City & State				6. Election Campaign Financing	-	May Be	
23		28				Trust Fund Contribution		to Fees	į
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intan			
4	25	29	30			r ersonar i roperty rux.	Yes :	No	1
· *	9. Name and Address of Curr		·····			10. Name and Address of New Registered Ag	jent		ļ
				81 Na	me				
SCH	OLL, CARL E A A A				4.8.4.4	ss (P.O. Box Number is Net Acceptable)			ł
	43RE ST S			82 Str	reet Addre	ss (P.O. Box Number is Net Acceptable)		il.	
	PETERSBURG FL 33711		-	83		The second second second second	33 101 55	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
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	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli				med corpo corporation	ration submits this statement for the purpose of cl s's board of directors. I hereby accept the appoint	ment as r	egistered	
SIGNATURE						when reinstating) , DATE			١.
OIOIVIORE	Signature, typed or printed name of registered a			Agent sign:	ature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECT	OPS IN 12	1 8
12.		AND DIRECTORS	13.				Change		
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14. I 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, with all other like empowered.