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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

OCUMENT # P96000103897 (0)

SHARK TOOTH, INC.

CARLSON STERLING, INC.

Principal Place of Business

Mailing Address

FILED May 14 1997 8:00am Secretary of State



5728 MAJOR BLVD SUITE 250 ORLANDO FL 32819		5728 MAJOR BLVD SUITE 250 ORLANDO FL 32819-7944					I	e Incorporated 27/1996	or Qualifie	ed 3a . Da	te of	ast F	Report /A	_	
	lace of Business	2a. Mailing Address					A FF:	Number	Au		7	A	oplied For		
21			26					60	1-34171	244			N	ot Applicab	ole
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5 . Cer	tificate of Statu	s Desired	X			Additional equired		
City & State			City & State						Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees			
Zip	25 Cou	Zip Cou 29 30			untry		8. This	This corporation has liability for intangible tax under s. 199.032, Fiorida Statutes No Yos No							
		Registered Agent						10. Name and Address of New Registered Agent							
COR	PORATION SERVICE			· · · · · · · · · · · · · · · · · · ·		81	Name					-			
	HAYS STREET				82	Street A	Street Address (P.O. Box Number is Not Acceptable)				· · · · · · · · · · · · · · · · · · ·				
TALL	AHASSEE FL 3230				83										
						63									
						84	City		*		FL	85	Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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															id
0.0	Signature, typed or printed n				TF: Registere	od Age	nt signature r	required when reinst			DATE				
12.		OFFICERS AND	DIRECTORS		13.			ADD	ITIONS/CHANG	GES TO OF	FICERS AND				on g
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OTTLE TROPILED							CACITY OF 210		###170 T		and the second	-		5/14/9	

4. I do hereby certify that the information supplied with this filing does /dt 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 septiciation or the receiver or trusty-of-empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it at an agency or on an attachment with an address.

CHATURE THEN SHE LAND WILL