PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000031799

1. Corporation Name

BLAKE, SHAW & COMPANY, INC.

Principal Place of Business	Mailing Address				
730 NORTHEAST 24 WAY	730 NORTHEAST 24 WAY				
FT. LAUDERDALE FL 33304	FT. LAUDERDALE FL 33304				

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90041 044 ***150.00



Principal Place	of Business	Mailing Address]	(10021005 114 (016) (40)) 0 2 115 01	()	11101 11311 10810 1	10110 1041 1041
730 NORTHEAST 24 WAY 730 NORTHEAST 24 WAY FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304							DO NOT WRI	TE IN THIS	SPACE	
						3 Dat	te Incorporated or Qualifed	TE IIV TITIO	OI AUL	
							/08/1997			
2 Principal Pl	ace of Business	2a, Mailing Address			~.*		Number +		_ Apr	olied For
21	300 0. 31 0301	26				65	-0754611		Not	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc		•					\$8.75 A	dditional
22	.,	27				5. Cer	tifcate of Status Desired		Fee Red	quired
City & State	•	City & State				6. Ele	ction Campaign Financing		\$5.00	May Be
23		28				Tru	st Fund Contribution		Added to	Fees
Zip	Country	Zip	Cou	ntry	<u> </u>	8. Thi	s corporation owes the curr	rent year Int		_
24 25 29 30			30	Personal Property Tax. Yes ☐No						
	9. Name and Address of Currer	nt Registered Agent		1		10. Na	me and Address of New I	Registered		.:
	N = OLAV III			81 N	Name		,			
	N, E. CLAY III			82 S	Street Addres	ss (P.O.	Box Number is Not Accept	able)		
	NORTHEAST 24 WAY					·-				
	AUDERDALE FL 33304			83						
				84 C	City				85 Zip C	ode
					•			FL	.	
office or re	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the obligations.	of Florida, Such change v	งลร ลแทกกทรคส	BV IDE	amed corpor corporation	ration sul	bmits this statement for the of directors. I hereby acce	purpose of pt the appoi	changing its ntment as rec	registered gistered
SIGNATURE								·		
	Signature, typed or printed name of registered age		(NOTE: Registered	Agent sig	gnature required s			DATE	ID DIDEOTO	50,11,40
12.		ND DIRECTORS	13.		<u> </u>	ADD	ITIONS/CHANGES TO OF	FICERS AN	Change	Addition
TITLE	PS NAME AND ASSOCIATION AS	☐ DELE							□ Onlingo	L Addition
NAME	SHAW, HEATHER M.		1.2 NA							}
STREET ADDRESS	730 NORTHEAST 24 WAY			REETADI						
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	□ pcle:		Y-ST-ZI			41		☐ Change	Addition
TITLE	VPT	☐ DELE			R	HKB	Roburt K		[_] Onlingo	
NAME	BLAKE, ROBERT K.		2.2 NA				NE 60 St			1
STREET ADDRESS	1641 NW 60TH STREET			REET AD	تئر ا	241	Ne 60	3708		[
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	□ pci c		TY-ST-Z	IP /-	-+- W	hull. 12/2	2200_	Change	Addition
TITLE	PS CLAVIII	☐ DELE	1						5. turigo	
NAME	SHAW, E. CLAY III		3.2 NA							
STREET ADDRESS	730 NORTHEAST 24 WAY			REET ADI						
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	☐ DELE		TY-ST-ZI		۲			☐ Change	[] Addition
TITLE	PS DODEDTIK-ID	. Ucte	4.2 N		_ _%	IAILE-	Robert K	JR		
NAME	BLAKE, ROBERT K. JR.				, l	المدين	05 m St			
STREET ADDRESS	645 RIVERA ISLE			REET ADI	IDKESS	וַנוּן	SE 7 St Land. 16/ =	3つつり	1	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	☐ DELE		Y-ST-Zi	" /	<u>-4- (</u>	AUC. 101	522A	☐ Change	☐ Addition
TITLE		ے کردد	5.2 NA							
NAME				REET ADI	ODRESS					
STREET ADDRESS				Y-ST-ZI						}
CITY-ST-ZIP	 	☐ DELE			"				Change	Addition
TITLE		□ DELE	6.2 NA						تو ماند ک	
NAME				REET ADI	DRESS					
STREET ADDRESS										
CITY-ST-ZIP			64 CI	Y-ST-ZI	ж					

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF