

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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 28 AM 8: 54

DOCUMENT # P97000035910 (3)

1. Corporation Name
SHIRFLET, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 444 LINCOLN RD., STE 500 MIAMI BEACH FL 33139
Mailing Address: 444 LINCOLN RD., STE 500 MIAMI BEACH FL 33139

2. Principal Place of Business: 9999 Collins Ave apt 16B Bal Harbour FL 33154
2a. Mailing Address: 9999 Collins Ave apt 16B Bal Harbour FL 33154

3. Date Incorporated or Qualified: 04/18/1997
4. FEI Number: [] Applied For [] Not Applicable
5. Certificate of Status Desired: [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: [] Yes [] No

9. Name and Address of Current Registered Agent: DANIELS, NICHOLAS M 1444 LINCOLN RD., STE 500 MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent: SHIRLEY K. FLETCHER 9999 Collins Ave, apt 16B Bal Harbour FL 33154

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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: Shirley K. Fletcher SHIRLEY K. FLETCHER 2-6-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	FLETCHER, SHIRLEY K	1.2 NAME	
STREET ADDRESS	9999 COLLINS AVE., APT. 16-B	1.3 STREET ADDRESS	
CITY-ST-ZIP	BAL HARBOR FL 33154	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	100002508631-4
NAME	WOLF, LAURENCE	2.2 NAME	-05/04/98--01007--013
STREET ADDRESS	21750 WOODWARD AVE.	2.3 STREET ADDRESS	****150.00 ****150.00
CITY-ST-ZIP	FERNDALE MI	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Shirley K. Fletcher SHIRLEY K. FLETCHER 2-6-98 305/1861 8206

CP2E034 (10/97)