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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000055759

SHELBY CONSULTING & PRODUCT DEVELOPMENT, INC.

\$ 10 (P) (B) (B) (C) (B) (C)	
Principal Place of Business;	13.33
7853 SECOND AVENUE SOUTH	
ST. PETERSBURG FL 33707	

2. Principal Place of Business

22

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

7853 SECOND AVENUE SOUTH ST. PETERSBURG FL 33707

FILED Jan 21, 1999 8:00am **Secretary of State**

01-21-1999 90059 017 ***150.00



Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

06/23/1997

59-3456391

4. FEI Number

 1	City & State City & State				6. Election Campaign Financing	□ \$5.00°	\$5.00 May Be	
23	and party of	28			Trust Fund Contribution		to Fees	
Zip 24	Country 25	Zip [3	Country 30		This corporation owes the cu Personal Property Tax.	rrent year Intangible ,_ ☐ Yes	≥ iv₀	
۲-	9. Name and Address of Current I	Registered Agent			10. Name and Address of New	Registered Agent		
		الزيد الريام الريام المراه المرياد الريام المرياد الريام	81	Name				
	DEN, WATSON R ESO	in the state of th			(0.0.0	· · · · · · · · · · · · · · · · · · ·		
ੁ _ੱ ੂ ਵ-501:	FIRST AVENUE NORTH	DEVELOP: EFF. DAT	82	Street Addr	ess (P.O. Box Number is Not Accep	table)		
SUITE 404			83		The control of the co			
ST.	PETERSBURG FL 33701				1960年 1980年 19			
	•		84	City	्रे के किया स्टार्किस्ट (विकास स्टार्किस्ट)	85 Zip (Code	
44.7	4. M. 27	45 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				<u> FL </u>		
- onice or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of im familiar with, and accept the obligation Signature, typed or printed name of registered agent ar	Florida. Such change was aut ns of, Section 607.0505, Florid	horized by to da Statutes.	the corporation	oration submits this statement for the on's board of directors. I hereby acce	e purpose of changing its pt the appointment as re	registered gistered	
12.	OFFICERS AND		13.	signature required			DO 151 40	
TITLE ·	CEOP :	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO O	FICERS AND DIRECTO	Addition	
NAME	SHELBY, JAMES R	, LJ DELETE	1.2 NAME		75 C4 187 189	Change	☐ Addition	
STREET ADDRESS	7853 SECOND AVENUE SOUTH				,			
	ST. PETERSBURG FL 33707		1.3 STREET					
TITLE	T TETERODONG FE 33/0/	□ DELETE	1.4 CITY-ST	- ZiP	•			
	CHELDY IAMEO D		2.1 TITLE			Change	☐ Addition	
NAME .	SHELBY, JAMES R		2.2 NAME					
STREET ADDRESS	7853 SECOND AVENUE SOUTH		2.3 STREET	ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33707	A STATE OF THE STA	2. 4 CITY-ST	-ZiP				
TITLE C. S.	BASTON STOTES OF THE	· ≒alistii - alio Delete	3.1 TITLE		*	☐ Change	, 🔲 Addition	
NAME	SHELBY, JAMES R	Market Strategy	3.2 NAME				1.7 (· (· 4	
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CITY-ST-ZIP	ST. PETERSBURG FL 33707		3.4. CITY-ST	-7IP	182 382 384 401			
TITLE	Visit was in the second	☐ DELETE	4.1 TITLE		F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change*	☐ Addition	
NAME 1993 CSC and	SHELBY, MICHAEL S		4.2 NAME		18.7% 97			
STREET ADDRESS	7853 SECOND AVENUE SOUTH		4.3 STREET	ADDESS				
C/TY-ST-ZIP	ST. PETERSBURG FL 33707			i				
TITLE	A .	· - DELETE:	4.4 CITY-ST- 5.1 TITLE	ZIP		[17] Change	Addition	
31 15114	LAPOINTE, JOANN	THE PERSON S	5.2 NAME			. □ cusude	☐ Addition	
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CITY-ST-ZIP	ST. PETERSBURG FL 33707	. □ DELETE	5.4 CITY-ST- 6.1 TITLE	ZIP	There is a street a	· · · · · · · · · · · · · · · · · · ·	E 4 (Tot = 0.49 ())	
TITLE	TARRENT TWO STREETS	T☐ DELETE	Α		٠.	☐ Change	Addition	
NAME S	CALL CARREST CONTRACTORS	the first that the said the	6.2 NAME				. 1 1	
STREET ADDRESS	The second secon	A STATE OF THE STA	6.3 STREET A	DDRESS	r	:	\$	
CITY-ST-ZIP	the state of the s	5 (81) 21	6.4 CITY-ST-				ļ	
14. I hereby c	ertify that the information supplied with t	his filing does not qualify for th	ne exemptio	n stated in Se	ection 119.07(3)(i). Florida Statutes	I further certify that the in	formation	

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.

E OF SIGNING OFFICER OR DIRECTOR