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

DOCUMENT #

P97000058652 (3)

SHELL-CON, INC.

FILED May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									1 1001	1 00 1 11 3 18 111 18011 40111 00111	99111 89181 91181 1911 8 91	1101 01110 11 0 1 1001
1280 SW 38TH AVE STE. 304-A POMPANO BEACH FL 33069					1280 SW 38TH AVE STE. 304-A POMPANO BEACH FL 33069				DO NOT WRITE IN THIS SPACE			
										orporated or Qualified 3/1997		
2.	Principal P	Place of Busin	ness	26	a, Mailing Add	dress			4. FEI Numi	per		Applied For
21				26)				6	5-07646	44 🗆	Not Applicable
	Suite, Apt.	uite, Apt. #, etc.				Suite, Apt. #, etc.				e of Status Desired		5 Additional
22		27						5. Certificat	e or status Desired	Fee Fee	Required	
_	City & Stat	• 			City & State			6. Election (6. Election Campaign Financing \$5.00 May Be			
23					*				Trust Fund Contribution Added to Fees			
	Zip		Country		<i>Z</i> ip 1	<u> </u>	Country	•		oration owes or has pa		
24		A Name	25 Address	29 of Current Regi	etered Agent	30	<u>'l</u>			Property Tax due June d Address of New Re		No
					stered Agein	·	81	Name	10, 1101110 011	A C	/ /	
			ION SERVICE	CUMPANY				Ke	chreth	B Day	ndler	
1201 HAYS GTREET TALLAHASSEE FL 32384-2525				2020			82	Street A	Address (P.O. Box N	umber is Not Acceptat	ole)	. RALI
TALLAMASOCE FL 32304-2525			2323			83		<u> </u>	DON HO	~, 30 /c	- - 207	
								-Yo	mpano	10each		
							84	City			FL 85 Z	ip Code
11	Pursuant	to the provis	ions of Sections	s 607.0502 and	607.1508. Flo	rida Statutes.	the above	c-named o	corporation submits	this statement for the p	ournose of changing	g its registered
•	office or r	registered ac	ent, or both, in	the State of Flor	rida. Such cha	inge was auth	orized by	the corp	oration's board of di	rectors. I hereby accep	ot the appointment	as 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 reg agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											2	
SIGNATURE Signature, typed or punited name of regulated agent and time if appreciable (NOTE Registored Agent signature required when reinstating) DATE											D	
12			OFFIC	CERS AND DIRE			13.		ADDITION	S/CHANGES TO OFFIC	CERS AND DIRECT	ORS IN 12
TITL	.E	PT				DELETE	1.1 TITLE				Chang	e 🔲 Addition
NAN	AME SANDLER, KENNETH B					1.2 NAME];	
STR	STREET ADDRESS 1280 SW 36TH AVE., STE. 3				1.3 STREET ADORESS			ADDRESS				ļi
	Y-ST-ZIP		ANO BEACH	FL 33069			1.4 CITY - S	T- ZIP				
TITL		VS				DELETE	2.1 TITLE				L Chang	e L Addition
NAM			NEY, ROBERT				2.2 NAME					
	REET ADDRESS 1280 SW 38TH AVE., STE. 30 1Y-ST-ZIP POMPANO BEACH FL 33069				1	2.3 STREET ADDRES						ļ
	Y-ST-ZIP	POMP	ANU BEACH	FL 33069		NEI ETE	2. 4 CITY-5	ST-ZIP		w.·	1 0	n line seekinn
TITL						DELETE	3.1 TITLE				<u>↓</u> Chang	e LJ Addition
NAM							3.2 NAME	ADDRESS				
-	EET ADDRESS						3.3 STREET	- 1				
TITL	Y-ST-ZIP	 				DELETE	3.4 CITY-5 4.1 TITLE	si - ZIP			Chang	e Addition
NAM					ا لب	16	4. 2 NAME	ļ			C Simila	100/(0)/
	EET ADDRESS						4.3 STREET	AUUBECC				
	Y-ST-ZIP						4.4 CITY-S					
TITE		- -				DELETE	5.1 TITLE	LEH	 -		☐ Chang	e Addition
NAA							5.2 NAME				_ •	
	EET ADORESS						5.3 STREET	ADDRESS				
	Y-ST-ZIP						5.4 CITY-S					
TITL						DELETE	6.1 TITLE				☐ Chang	e Addition
NAN	AE .						6.2 NAME	1				
STR	EET ADDRESS						6.3 STREET	ADDRESS				
CITY	Y-ST-ZIP						64 CITY-S	1 - ZIP				
		- 4			· · · · · · · · · · · · · · · · · · ·							

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.