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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000058969

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90065 020 ***150.00



SHELLY	MARCO, INC.	<u> </u>					
Principal Place	e of Business	Mailing Address			* 18811-51 142 1411 1421 4411 4211 1		
701 BRICKELL AVE SUITE 3000 MIAMI FL 33131		701 BRICKELL AVE SUITE 3000 MIAMI FL 33131		DO NOT WRITE	IN THIS SPACE	, 	
					3. Date Incorporated or Qualifed		
	<u> </u>				07/07/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	1	Applied For
26					NOT_APPLICABLE		Not Applicable 5 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	+	Required (
1		City & State			2 First Compile Financia		00 May Be
City & Stat	e	├ ¬ '			6. Election Campaign Financing Trust Fund Contribution		ed to Fees
Zip	Country	Zip Zip	Countr		8. This corporation owes the current		
	25		30	,	Personal Property Tax.	Yes	No
4	9. Name and Address of Current	- 	301		10. Name and Address of New Reg	gistered Agent	
	T. Hame and Hadioos of Collecti		8	1 Name			
INTR	ASTATE REGISTERED AGENT C	Orpration	8:	2 Street Add	ress (P.O. Box Number is Not Acceptable		
701 BRICKELL AVE			0	Z Street Addi	ress (F.O. Box Number is Not Acceptable	_	
SUITE 3000			8	3			
MIAMI FL 33131			-	 		ingli	Zip Code
	•		8-	4 City		FL 85 2	Zip Code
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS ANI		Registered Ag	ent signature require	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	CTORS IN 12
TTILE	DPAS DELETE		1.1 TITLE			☐ Char	nge 📋 Addition
NAME	CERRI, PAOLO		1.2 NAME				
STREET ADDRESS	701 BRICKELL AVE, STE 300		1.3 STRE	ET ADDRESS			į.
CITY-ST-ZIP	MIAMI FL 33131		1,4 CfTY-	-ST-ZIP			
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NAME	CERRI, JACKIE		2.2 NAME	:			
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CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY	-ST-ZIP			F7 4 1499
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CITY-ST-ZIP		DELETE	6.1 TITLE			Cha	nge Addition
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NAME STREET ADDRESS				ET ADDRESS			
224HILA (1446)	d.						

6.4 CITY-ST-ZIP 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 taustee 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, and a attach mynificity an appears, with all other like empowered.

SIGNATURE:

KEQUINER

305-789-1758