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PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1998 8:00am

Secretary of State

Sandra B. Morthagn

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000096465 (4)

SAND AND SHELLS INCORPORATED

Principal Place of Business Mailing Address LA CONCHA SHOPPING PLAZA. SUITE 1 LA CONCHA SHOPPING PLAZA, SUITE 1 20001 GULF BLVD. 20001 GULF BLVD. INDIAN SHORES FL 33785 DO NOT WRITE IN THIS SPACE INDIAN SHORES FL 33785 3. Date incorporated or Qualified 11/10/1997 2. Principal Place of Business 2a. Mailing Address Applied For Dockside 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Yes 30 Personal Properly Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARDNER, LISA 210 1ST ST. 82 Street Address (P.O. Box Number is Not Acceptable) **INDIAN ROCKS BEACH FL 33785** 83 84 Zip Code 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. Thereby accept the appointment as registered agent. Lam familial with land accept the obligations of, Section 607,0505, Florida Statutes. SIGNATUR (NOTE Registered Agent signature rospiced whom reinstating) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DILETE Addition Diractor Change Officer Lisa Gardner NAME Sonja Gardner and 1st St. 1.2 NAME 210 1st **€**† STREET ADDRESS 1.3 STREET ADDRESS Indian Rocks Baach FL 33785 Indian Rocks Beach, FL 33785 CITY-ST-ZIF 1.4 CITY - ST - ZIP DILETE TITLE Change 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE Change 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3 4. CITY - ST - ZIF TATLE ☐ DELFTE 4.1 Till E Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP TITLE DELETE 61 THEE Change Addition

6.2 NAME

6.3 STREET AUDRESS

4/10/19

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