## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # P98000028926** 05-24-2004 90004 049 \*\*\*150.00 SHORESIDE FLORIDA, INC. Mailing Address Principal Place of Business 2800 SW 4TH AVENUE BAY 5 **ATLIMIS BUILDING** 2800 SW 4TH AVENUE BAY 5 FT LAUDERDALE, FL 33335 FORT LAUDERDALE, FL 33335 2. Principal Place of Business 3. Mailing Address 2800 SW WILMING RUDO Suite, Apt. #, etc Suite, Apt. #, etc 05212004 CR2E034 (10/03) 2800 SN 477 KK City & State City & State 4. FEI Number Applied For Tores 65-0842237 FORT LINDSCOOK Not Applicable \$8.75 Additional BROW ARD 5. Certificate of Status Desired browner 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ADAMS, GALLINAR, IGLESIAS & MEYER, P.A. Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE., STE. 2150 MIAMI, FL 33131 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Detete TITLE ☐ Addition TITLE NAME SHIPP, ARTHUR J NAME 200 SOUTH BISCAYNE BLVD., STE. 3900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition PACKHAM, KEITH R NAME NAME 200 SOUTH BISCAYNE BLVD., STE. 3900 STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP MIAMI, FL 33131 TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME, STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental 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 ITUSIEE empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactiment with an address with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

FILED

May 24, 2004 8:00 am

Affachment

54055402



Agents for OCEAN IMAGES LIMITED

Atlantis Bldg. 2800 SW 4<sup>th</sup> Ave, Bay 5, Fort Lauderdale, FL 33315

PH: 1-954-523-2308 FAX:1-954-527-4262

21<sup>st</sup> May 2004

Reference:

Annual Report - Late

Shoreside Florida, Inc - P98000028926

Hello, It seems I am late filing this, as I did not quite understand how the filing had changed. I have always paid in full and on time for the last 7 years as I had always received the large Division of Corportations form in the mail and as I did not this year I have missed the filing a couple of weeks.

Is there any way some leniency may be given me for this error regarding the late payment fee? I apologize for asking this and for this delay and will in the future just pay online.

I look forward to hearing from you if at all possible.

Yours truly

Eric A Churchill

President.

Shoreside Florida, Inc

(954) 993-2062

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