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 # P98000061962

QUEEN OF SHEBA CORP.

FILED Mar 05, 1999 8:00 am Secretary of State

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Principal Place of Business Mailing Address												
C/O MANNY TREGERMAN C/O MANNY TREGERMAN								,				
2495 PRINCETON COURT			2495 PRINCETON COURT				DO NOT WRITE IN THIS SPACE					
WESTON FL 33	327	WE	WESTON FL 33327				-	3. Date Incorporated or Qualifed				
							1	07/14/1998				- {
9 Beinging D	lace of Business	120	2a. Mailing Address					FEI Number	 -	<u> </u>	Applied For	
- i '	ace of business	—	26					65-0862217		-	Not Applicable	_
Suite, Apt. #, etc.			Suite, Apt. #, etc.				 				Additional	7
¬ '''			27				5.	Certifcate of Status Desired	□· ,		Required	
City & State			City & State				-	Election Campaign Financing		\$5.00	May Be	ヿ
¬ ·			28					Trust Fund Contribution		•	to Fees	-
23 Zip	Country					ountry		This corporation owes the curren	t vear Inta	ngible	· <u>-</u>	ヿ
24	25	29	¬ '			'		Personal Property Tax.		Yes	⊠ No	
24	9. Name and Address of		tered Agent	. 1 1			10. Name and Address of New Registered Agent				\Box	
					81	Name				-		1
COR	PORATION SERVICE CON	IPANY			02	C4	d== == (D	O. Boy Number is Not Assertab	<u> </u>			
1201		82 Street Addre			ness (P.	O. Box Number is Not Acceptab						
TALL	AHASSEE FL 32301-2525	5			83	 						٦
										T=- (=-		4
					84	City			FL	85 Zij	o Code	1
44 Pursuant	to the provisions of Sections (307 0502 and 6	07.1508. Florida Statu	ites, the a	bove	e-named com	poration	submits this statement for the p	urpose of c	hanging i	its registered-	ᅴᅩ
office or r	egistered agent or both in th	e State of Floric	la. Such change was	authorized	3 DV	the corporati	tion's bo	ard of directors. I hereby accept	the appoin	tment as	registered	
agent. I a	m familiar with, and accept the	e obligations of,	Section 607.0505, F	onua Stat	utes	1.						
SIGNATURE	Signature, typed or printed name of ragio	stered agent and title i	f applicable. (NO	E. Registered	Agen	nt signature require	red when re	einstating)	DATE			} ;
12.	AFFIORNS AND DISCOTORS				13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECT	ORS IN 12	
TITLE	PIT		☐ DELETE	1.1 TI	TLE				_	☐ Change	e 🗌 Additio	on]
NAME	Manny Treger	man		1.2 N	AME			•				
STREET ADDRESS	- Lord Control Control				1.3 STREET ADDRESS			•				
CITY-ST-ZIP	Weston Fl. 3	3327		14 C	TY-S'	iT-ZIP						1 8
TITLE	V/5		☐ DELETE	2.1 TI				<u> </u>		Change	e 🔲 Additio	n C
NAME	Tonot L. Hea	ter		2.2 N	AME							- [
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CITY-ST-ZIP	Weston FL 33327				2.4 CITY-ST-ZIP							
TITLE	<u> </u>		☐ DELETE	3.1 T		51 2.11				Change	e 🗀 Additio	on
NAME				3.2 N	AME							}
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NAME						T ADDRESS						
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TITLE				6.2 N						والماردي		
NAME						T 40000F00						1
STREET ADDRESS				6.3 8	IKEE!	TADDRESS						i

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: >