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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P 98000064979

1. Corporation Name SHARK INTERNATIONAL INVESTMENTS, INC.

**FILED** Feb 01, 1999 8:00 am Secretary of State

02-01-1999 90004 006 \*\*\*150.00 05-17-1999 90006 038 \*\*\*150.00

Principal Place of Business Mailing Address					
ala sta	mbon C Danner C D	λ			
	phen G. Danner, C.P.				
1101 Brickell Avenue, Suite 1402				DO NOT WRITE IN THIS SPACE	
Miami,	FL 33131				3. Date Incorporated or Qualifed 07/23/98
2. Principal P	al Place of Business 2a. Mailing Address				4. FEI Number Applied For
21	1 26				65-0855969 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		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	Zip	Cor	ntry	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		24 1	10. Name and Address of New Registered Agent
Linda M	. Smith Esa			81 Na	Name
Linda M. Smith, Esq.				<b>82</b> Stre	Street Address (P.O. Box Number is Not Acceptable)
11900 Biscayne Blvd., Suite 200 Miami, FL 33181					
mramr,	וסוככ עד			83	
				84 City	City FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607,1508, Florida State	utes, the a	ove-nam	amed corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligati	f Florida. Such change was	authorized	by the co	e corporation's board of directors. I hereby accept the appointment as registered
	m lamiliar with, and accept the congain	ons of, Section 607.0305, Fi	ionga Stati	ies.	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NO)	TE: Registered	Agent signat	gnature required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	☐ DELETE	1.1 TC	LE	☐ Change ☐ Additio
NAME	Maria Giordano		12 N	ME	
STREET ADDRESS	c/o Stephen G. Dann	er	1.3 \$1	REET ADDRI	DRESS
CITY-ST-ZIP	1101 Brickell Avenu	e #1402	14 CI	Y-ST-ZIP	P
TITLE		☐ DELETE	2.1 TV	LE	AS Change X Additio
NAME			2.2 N	ME	Linda M. Smith, Esq.
STREET ADDRESS			2.3 ST	REET ADDRI	ORESS 11900 Biscayne Blvd., Suite 200
CITY-ST-ZIP			2.4 C	ry-st-zip	Miami,FL 33181
TITLE		☐ DELETE	3.1 TF	LE	☐ Change ☐ Additio
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 ST	REET ADDRE	DRESS
CITY-ST-ZIP			34 C	Y-ST-ZIP	IP .
TITLE		☐ DELETE	4.1 TF	LE	☐ Change ☐ Additio
NAME			4. 2 N	ME	
STREET ADDRESS			4.3 ST	REET ADDRE	DRESS
CITY-ST-ZIP		•	4 4 CF	Y-ST-ZIP	Ρ
TITLE		☐ DELETE	5.1 TF		☐ Change ☐ Addition
NAME I			5.2 NA	ИE	
STREET ADDRESS			5.3 ST	REET ADDRE	ORESS
CITY-ST-ZIP					
			5.4 CI	Y-ST-ZIP	P
TITLE		DELETE	6 1 TJT		P Change Addition

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

Linda M. Smith, Asst. Sect. 4/26/99 (305) 866–6434

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR