## 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 # P98000107218

1. Corporation Name

SHIP AND SHORE INCORPORATED

Principal Place of Business Mailing Address									98191 (1811 BB	**** ***** ***** ***	
840 WASHINGT	ON STREET (BAY 2)		5840 WASHINGTON STREET (BAY 2)								
OLLYWOOD FL 33023		HOLLYWOOD FL 33023					DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualifed			
								12/24/1998			
2. Principal P	lace of Business	2a. Mailing Add	dress					4. FEI Number		App	lied For
24		26					65-0882789	-	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.								\$8.75 A	dditional
22		27						5. Certificate of Status Desired		Fee Red	quired
City & Stat	e	City & State						6. Election Campaign Financing		\$5.00	May Be
23		28						Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	-	_	intry			8. This corporation owes the cur	rent year Inta		_/
24	25	29		30	,			Personal Property Tax.			<b>I</b> No
	9. Name and Address of Currer	t Registered Agen	<u>t</u>		-			10. Name and Address of New	Registered	Agent	
IFAIL	0 1 01110				81	Nam	е				
JENKS, LOUIS					82	Street Address (P.O. Box Number is Not Acceptable)					
	WASHINGTON STREET (BAY 2)							·			
HULL	YWOOD FL 33023				83						ļ
	•				84	City				85 Zip C	ode
						Ĺ <u>,</u>			<u> </u>		
11. Pursuant	to the provisions of Sections 607.050 agistered agent, or both, in the State	2 and 607.1508, Flo	orida Statute	s, the a	bove d by	s-name	d corpo	ration submits this statement for the n's board of directors. I bereby acce	purpose of pt the appoin	changing its ntment as rec	registered iistered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607	7.0505, Flor	ida Stat	utes		porduoi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F		´
SIGNATURE											\
	Signature, typed or printed name of registered age		(NOTE:	<u> </u>	Agen	nt signatu	e required	when reinstating)	DATE AAN	D DIDECTO	DC IN 12
12.	r=	ID DIRECTORS	DELETE	13.			<del>-   -   -   -   -   -   -   -   -   -  </del>	· ADDITIONS/CHANGES TO OF	FICERS AN	Change	Addition
TITLE	D	u	DELETE	1,1 T						□ cuange	
NAME	PERON, JORGE				AME						
STREET ADDRESS	5111 SARAZEN DR			1.3 S	TREET	ADDRE:	SS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		DELETE.		ITY-S	t-ZIP				Change	Addition
TITLE	D				2.1 TITLE					[_] Change	
NAME	PERON, MARLENE	_		2.2 N					_		
STREET ADDRESS	5111 SARAZEN DR	· · · · · · · · · · · · · · · · · · ·		1		ADORE:	SS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		201 575	_	OTY-S	T-ZIP	_			☐ Change	Addition
TITLE	D	Ų	DELETE	3.1 ₹						☐ Criange	
NAME	JENKS, JODI			3.2 N							
STREET ADDRESS	6161 SW 188 AVE			1		ADDRE	SS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33332		DELETE	_	ZITY-S	T-ZIP	<b></b>			Change	Addition
TITLE	D	Ц	DELETE	4.1 7						□ Citatige	
NAME	JENKS, LOUIS			1	IAME						
STREET ADDRESS	6161 SW 188 AVE			4.3 S	TREET	ADDRE	is ]				
CITY-ST-ZIP	FT. LAUDERDALE FL 33332	<u>—————————————————————————————————————</u>	DELETE	_	ΠY-\$	T-ZIP				☐ Change	Addition
TITLE		U	DELETÉ	5.1 T						Ci cuange	☐ Addition [
NAME				5.2 N							
STREET ADORESS				1		r addre:	8				-
CITY-ST-ZIP			חבו בזב	5.4 C	TY-S	I-ZIP	_			Change	Addition
TITLE		U	DELETE	6.2 N							L.J Addiaoit
NAME											
STREET ADDRESS	I			■ 6.3 S	IKEET	FADDRE	×>				

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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

985-1733

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90087 046 \*\*\*150.00