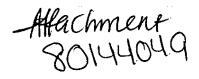
FILED

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)					Sep 04, 2003 8:00 am
DOCUMENT # P99000090840 1. Entity Name SHARKEL ENTERPRISES, INC.					Secretary of State 09-04-2003 90071 002 ***150.00
Principal Plac 17623 NORTH SUITE 101 CITRA FL 321	I US 13	HIGHWAY 301	Mailing Address 7895 E, HWY #318 CITRA FL 32113		
2. Principal P			3. Mailing Address 107 S'E	50th Tek	RACE
Suite, Apt.			Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State	⁶ م		Sity & State	77 ,	4. FEI Number 59-3602491 Applied For Not Applicable
Zip	_	Country 713	34471	Country USA	5. Certificate of Status Desired S8.75 Additional Fee Required
<u>' </u>	6	Name and Address of Current R	egistered Agent		7. Name and Address of New Registered Agent
Na		1	, <u></u>	Name	ليهاجه تسلم ال
RADFORD 7895 E. H		· •		Street Address	(P.O. Box Number is Not Acceptable)
CITRA FL		· .	manager (*	
,				City	FL 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. Need or printed name of registered agent and title if applicable. (NOTE: Registree Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00					
After Ser	otem	ber 10, 2003 Fee will be \$750.0 able to Florida Department of \$	•		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.		OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	789	DFORD, SHARON 95 E. HWY #318 TA FL 32113	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filling 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 trustee 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 attachment with an address, with all other like empowered.					

SIGNATURE:



September 1, 2003 Florida Dept. of State Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

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Document # P99000090840

FEI # 59-3602491 Request for Waiver of Late Fee

Dear Madam or Sir:

I am writing this letter to request that you waive the late fee. I am also attaching a copy of my notice showing that it was forwarded to my new address sometime in July. I did not receive the original notice as I moved in March. I have had to move into town and stay with my elderly mother. I still own the old property and was picking up my mail until about June, but I did not get the original notice.

I have filed on-line in previous years when I got the first notice. We have never been late and I am formally requesting that the late fee be waived.

I have put the business up for sale and need to know what documents I will need to complete when the business I sold and the corporation is dissolved.

Thank you for your consideration in this matter.

Sincerely,

Sharon Lee Radford, President

Sharkel Enterprises dba Box Office Video

harn Lu Rodford

107 S.E. 50th Terrrace

Ocala, FL 34471 (352) 368-3487

Previous address:

7895 E. Highway #318

Citra, FL 32113

Business Address:

17623 North Highway U.S. #301, Suite #101

Citra, FL 32113