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

PROFIT CERPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S19902 1. Corporation Name

SHEAURAY, INC.

Principal Place of Business

1201-14TH STREET WEST

BRADENTON FL 34205

Mailing Address 1201 14TH STREET WEST **BRADENTON FL 34205**

FILED Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90047 022 ***150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qual 12/17/1990	ifed			
· .	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For	15.
2. Principal Pl	26 Walling Address			65-0236550		L	Applicable	3	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Certificate of Status Desire	d 🗆	\$8.75 Ad		l 3
City & State	9	City & State		/a	6. Election Campaign Finance	ing	\$5.00 M		
23		28			Trust Fund Contribution		Added to	Fees	┨
Zip	Zip Country Zip			ntry	8. This corporation owes the	current year Int		ales.	
24	<u> </u>	0		Personal Property Tax.			No	┨	
Name and Address of Current Registered Agent				81 Name	10. Name and Address of N	ew Registered	Agent		ł
MANLEY, MEI-RONG				`	ess (P.O. Box Number is Not Acc	eptable)	<u> </u>	· <u>·</u> ·····	
	14TH STREET WEST				e in alter lactions as a		<u> </u>	mindi del	1
BRAI	DENTON FL 34205	,		83					
	•			84 City	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FI	85 Zip Co	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE									
	Signature, typed or printed name of registered agent a		_	Agent signature required	d when reinstating)	DATE	ID DIRECTOR	2C IN 12	1 6
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO	OFFICERS AN	Change	Addition	3
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NAME	MANLEY, MEI-RONG		1.2 NA		•		•		8
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STREET ADDRESS	HRAME TOR			TY-ST-ZIP					-
CITY-ST-ZIP 1 1	DOMESTINE SCHOOLSELL CONTRACTOR		J.7 G		***	*			

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.