

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S52033**

(5)

1. Corporation Name

SHARK AND TARPON NORTH, INC.



Principal Place of Business

2925 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL 33308-4207

Mailing Address

2925 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL 33308-4207

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
05/10/1991

3a. Date of Last Report
04/24/1995

4. FEI Number
65-0275339

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**ZIEGLER, PATRICIA M.
2925 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0600 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered 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 607.0605, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

12.1 TITLE	D	<input type="checkbox"/> DELETE
12.2 NAME	ZIEGLER, PATRICIA M.	
12.3 STREET ADDRESS	2925 E. COMMERCIAL BLVD.	
12.4 CITY, ST., ZIP	FORT LAUDERDALE FL	
12.5 TITLE	D	<input type="checkbox"/> DELETE
12.6 NAME	ZIEGLER, DEVON	
12.7 STREET ADDRESS	2925 E COMMERCIAL BLVD	
12.8 CITY, ST., ZIP	FORT LAUDERDALE FL	
12.9 TITLE	D	<input type="checkbox"/> DELETE
12.10 NAME	MICHAELS, VICTOR	
12.11 STREET ADDRESS	2925 E COMMERCIAL BLVD	
12.12 CITY, ST., ZIP	FORT LAUDERDALE FL	
12.13 TITLE	<input type="checkbox"/> DELETE	
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY, ST., ZIP		
12.17 TITLE	<input type="checkbox"/> DELETE	
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY, ST., ZIP		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST., ZIP	
13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST., ZIP	
13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST., ZIP	
13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST., ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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, the receiver or trustee or 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 as an attachment with an address.

SIGNATURE: *Vic Michaels*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)