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**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S54060

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SHADOW INFORMATION SERVICES, INC.

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i ilitoipai ria	ce of Business	Mailing Address							21211 Q \$   IPO	
2000 NW 88		2000 NW 88 CT				1				
MIAMI FL 331		MIAMI FL 33172-2627				•			of Donast	
						3. Date Incorporated or Qualified 05/21/1991		ale of La <b>01/19</b> 8	st Report	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22		2a. Mailing Address 26			4. FEI Number 65-0270085	Applied For Not Applicab				
		Suite, Apt. #, etc.	<b>├</b> ── '			5. Certificate of Status Desired	X	\$8.75 Additional Fee Required		
City & Sta	ate	Cily & State				Election Campaign Financing     Trust Fund Contribution			00 May Beded to Fees	
Zip	Country	Zη>	Cour	ıtry		8. This corporation has liability for i			ler s. 199.03	
L	25 9. Name and Address of Cu	29	30]				3	_ No		
		rrent Hegistered Agent		81	Name	10. Name and Address of New Re	gistered	Agent		
	HMACHTENBERG, LEE C		l	١,	1 46211163					
	33 SUNSET DRIVE ITE 201		Ţ	82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)			
	AMI FL 33143		•	83						
			-	84	City			85	Zip Code	
			i		•		FL	.	·	
	I to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the of Signature, typed or proted mane of registre.					ared when reinstaing)	DATE			
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I do nevery certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Turther certify that the information indicated on this annual report or surplicemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 chapted, or on an attachment with an address

CNATURE.