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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$59138
SHIP 'N SHORE ENTERPRISES, INC.

(5)

FILED May 20 1997 8:00am Secretary of State

Principal Place 3325 BRENTWO PUNTA GORDA US	OD CT	Mailing Address 3325 BRENTWOOD CT PUNTA GORDA FL 33950-6371 US							
						3. Date Incorporated or Qualified 06/12/1991		ite of Last I 30/1996	Report
— '	lace of Business	2a. Mailing Address				4. FEI Number 65-0275238		<u> </u>	Applied For
Suite, Apt. #, etc.		[26] Suite, Apt. #, etc	; },						Not Applicable Additional
22		27	:			5. Certificate of Status Desired			Required
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution			D May Be d to Fees
Zip 24	Country Zip Go 25 29 30		unlry	,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sigma\) No				
AVER	9. Name and Address of Currer	nt Registered Agent	·	81	Name	10. Name and Address of New Re	gistered .	Agent	
AKERS, ROBERT 3325 BRENTWOOD CT						and the same of th			
	TA GORDA FL 33950			82	Street Addr	ress (P.O. Box Number is Not Acceptat	ole)		
•				83					
			i	84	City			85 Zip	Code
11 Durement	to the provisions of Sections 607.060	02 and 607 1508 Etorida	Statular the s	1	namod corr	poration submits this statement for the plant in board of directors. I hereby acception's board of directors.	FL	changing	its registered
12.	Signature, typed or printed name of registered age OFFICERS AN	D DIRECTORS	13		ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS ANS	DIRECTO	
NAME	AKERS, ROBERT			NAME	ľ			[_] Change	[_] Addition
STREET ADDRESS	3325 BRENTWOOD COURT		1.3 \$	STREET	ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL ST			DITY-S	T-ZIP				
TITLE	VECO LIBERTI			2.1 TITLE 2.2 NAME				☐ Change	Addition
STREET ADDRESS	3325 BRENTWOOD COURT		B i		ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL				S1 - 21P				
TITLE		DELET	E 3.11	ETLE				Change	Addition
NAME.				NAME					
STREET ADDRESS CITY-ST-ZIP			1 7		ADDRESS ST- ZIP				
TITLE		DELET		ITLE	31.21			Change	Addition
NAME			4.2	NAME					
STREET ADDRESS					ADDRESS				
				OTY-S THLE	T - 74P			Change	Addition
CITY-ST-ZIP				.,	j			go	
CITY-ST-ZIP TITLE NAME		[_] DELET		AME	l				
TITLE		L_J D£IE1	þ.2 h		ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP			5.2 h 5.3 s 5.4 (STREET CITY - S	1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELET	5.2 h 5.3 s 5.4 € 6.1 T	STREET CITY - S LITLE	1			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			526 535 546 E 517 521	STREET CITY - S LITLE NAME	1-2IP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			5.2 M 5.3 S 5.4 C 6.1 T 6.2 M	STREET CITY - S LITLE NAME	ADDRESS			Change	Addition

sopported and a must report is the and accurate and making signature shall have the same regardined as it made that or the recliver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name or the required by Chapter 607, Florida Statutes; and that my name or the required by the results of the results