

FILED

Jul 10 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S78091 (3)

1. Corporation Name
SHEAM, INC.

Principal Place of Business
202 MANGO TREE
EDGEWATER FL 32132
US

Mailing Address
P.O. BOX 756
EDGEWATER FL 32141

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
09/05/1991

4. FEI Number
59-3083972

Applied For
Not Applicable

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

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

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
Yes No

8. Name and Address of Current Registered Agent
HAVEN, EDWARD S.
P.O. BOX 756 - 202 Mango Tree Drive
EDGEWATER FL 32132-0756

9. Name and Address of New Registered Agent

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 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]

12. OFFICERS AND DIRECTORS
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 CITY-ST-ZIP
1.6 CITY-ST-ZIP
1.7 CITY-ST-ZIP
1.8 CITY-ST-ZIP
1.9 CITY-ST-ZIP
1.10 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 CITY-ST-ZIP
1.6 CITY-ST-ZIP
1.7 CITY-ST-ZIP
1.8 CITY-ST-ZIP
1.9 CITY-ST-ZIP
1.10 CITY-ST-ZIP

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.

SIGNATURE: [Signature]