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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$90952

1. Corporation Name

SHIRLEY WEBER, INC.

Mailing Address
560 HARBOR COVE CIRCLE LONGBOAT KEY FL 34228

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90047 024 ***150.00



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City & State Personal Property Tax. 10. Name and Address of New Registered Agent WEBER, SHIRLEY 560 HARBOR COVE CIRCLE LONGBOAT KEY FL 34228 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 14. 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 agent. I aminism with, and except the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature by the City of P.O. Box Number is Not Acceptable) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. TITLE DELETE 12. TITLE DELETE 13. TITLE DELETE 14. TITLE DELETE 15. TITLE	Suite, Apt.	#, etc.	27				~	5. Certificate of Status Desired			
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9. Name and Address of Current Registered Agent WEBER, SHIRLEY 500 HARBOR COVE CIRCLE LONGBOAT KEY FL 34228 11. Pursuant to the provisions of Sections 807,0502 and 807,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice 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, 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, 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, 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, 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, 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, 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, or both, in the State of Florida, Such change agent, and the provisions of Statutes. The appointment as registered agent, or both, and accept the appointment as registered agent, or both, and accept the appointment as registered agent, or both, and accept the provisions of Statutes. The accept the appointment as registered agent, and accept the appointm		Country	28	Zin	Cour	ntrv			ar Intar		
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S80 MARBOR COVE CIRCLE LONGBOAT KEY FL 34228 84 City FL 85 Zip Code 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 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, and accept the obligations of Section 607 0505, Floridas Statutes. SIGNATURE Signature, types or persent name of inspitations' agent and the if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS IN 13. TITLE 12. NAME STREET ADDRESS CITY-ST-ZP TITLE OBLETE 1.5 STREET ADDRESS CITY-ST-ZP TITLE OBLETE 3.5 STREET ADDRESS CITY-ST-ZP CITY-	Weber, Shirley										
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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.

SIGNATURE: