

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

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V14536 (9)
 1. Corporation Name
SHOPPES ON 18TH STREET, INC.



Principal Place of Business 6006 SW 18TH STREET STE. B-8 BOCA RATON FL 33433 US	Mailing Address 6006 SW 18TH ST STE. B-8 BOCA RATON FL 33433 US
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DO NOT WRITE IN THIS SPACE

21 Principal Place of Business Suite, Apt. #, etc.	26 Mailing Address Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 Zip	29 Zip
25 Country	30 Country

3. Date Incorporated or Qualified 02/17/1992	
4. FEI Number 65-0320951	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
BOICE, YVONNE S
6018 SW 18TH STREET
SUITE 10
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

B1 Name BOICE, YVONNE S.	
B2 Street Address (P.O. Box Number is Not Acceptable) 6006 SW 18th Street	
B3 Suite B-8	
B4 City Boca Raton	B5 Zip Code FL 33433

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 *Yvonne S. Boice* **President** 4/14/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input type="checkbox"/> DELETE	1.1 TITLE DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOICE, YVONNE S		1.2 NAME BOICE, YVONNE S.	
STREET ADDRESS 6018 SW 18TH STREET, STE. 10		1.3 STREET ADDRESS 6006 SW 18th Street-Suite B-8	
CITY-ST-ZIP BOCA RATON FL		1.4 CITY-ST-ZIP Boca Raton, FL 33433	
TITLE VTS	<input type="checkbox"/> DELETE	2.1 TITLE VTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOICE, LAUREN A		2.2 NAME BOICE, LAUREN A.	
STREET ADDRESS 6018 SW 128TH STREET, STE. 10		2.3 STREET ADDRESS 6006 SW 18th Street-Suite B-8	
CITY-ST-ZIP BOCA RATON FL		2.4 CITY-ST-ZIP Boca Raton, FL 33433	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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: *Yvonne S. Boice* **President** 4/14/98 **338-8443**

CR2E034 (10/97)