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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V22436

1. Corporation Name

SHOPMAN, INC.

Principal	Place o	f Business

Mailing Address

## FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90001 045 \*\*\*150.00



Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Country  Suite, Apt. #, etc.  Country  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Country  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Country  Suite, Apt. #, etc.  Suite, Apt	fed d d d d d d d d d d d d d d d d d d	ar Intanç	\$8.75 AFee Re \$5.00 Added togible Yes	equired May Be
2. Principal Place of Business 2. Mailling Address 2. Mailling Address 2. FEI Number 2. 65-0329930  Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Country 2. Zip 2. Country 2. Zip 2. Country 2. Zip 2. Country 3. This corporation owes the Personal Property Tax.  9. Name and Address of Current Registered Agent  BAKER, JAMES J. 5111 GEORGIA AVE. WEST PALM BEACH FL 33405	d	ar Intanç	\$8.75 A Fee Re \$5.00 Added t gible Yes	ot Applicable Additional equired May Be to Fees
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City & State City & State 6. Election Campaign Financians Trust Fund Contribution  Zip Country Zip Country 8. This corporation owes the Personal Property Tax.  9. Name and Address of Current Registered Agent 10. Name and Address of New Street Address (P.O. Box Number is Not Accument Page 11. Street Address (P.O. Box Number is Not Accument Page 12. Street Address (P.O. Box Number is Not Accument Page 13. Street Address (P.O. Box Number is Not Accument Page 14. Street Address (P.O. Box Number is Not Accu	current yea		Added t gible ] Yes	to Fees
Trust Fund Contribution  Zip Country Zip Country  29 30 Personal Property Tax.  9. Name and Address of Current Registered Agent  BAKER, JAMES J. 5111 GEORGIA AVE. WEST PALM BEACH FL 33405  Trust Fund Contribution  8. This corporation owes the Personal Property Tax.  8. Name Personal Property Tax.  81 Name  82 Street Address (P.O. Box Number is Not Acc	current yea		gible ] Yes	
9. Name and Address of Current Registered Agent  BAKER, JAMES J. 5111 GEORGIA AVE. WEST PALM BEACH FL 33405  Personal Property Tax.  10. Name and Address of Ne  81 Name  82 Street Address (P.O. Box Number is Not Acc	w Registe		] Yes	□No
9. Name and Address of Current Registered Agent  81 Name  BAKER, JAMES J.  5111 GEORGIA AVE.  WEST PALM BEACH FL 33405  82 Street Address (P.O. Box Number is Not Acc		ered Ag	ent	
BAKER, JAMES J. 5111 GEORGIA AVE. WEST PALM BEACH FL 33405  82 Street Address (P.O. Box Number is Not Acc	eptable)	<del></del>		
5111 GEORGIA AVE. WEST PALM BEACH FL 33405	eptable)			
84 City		_		
	<u> </u>	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			anging its	registered
office or registered egent, or both, in the State of Florida, Such change was authorized by the compration's board of directors. I necessary	ccept the	appointn	nent as re	gistered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				}
SIGNATURE   Signature   Noned or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DAT	TE		
APPLICATION AND PROPERTY OF TO			DIRECTO	)RS IN 12
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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 informationated 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 (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: