

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

55 MAR 28 PM 1:54

DOCUMENT # V26272

(7)

1. Corporation Name
SHIRE, INC.

Principal Place of Business
3049 NE 163 ST
NORTH MIAMI BEACH FL 33160

Mailing Address
3049 NE 163 ST
NORTH MIAMI BEACH FL 33160

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/03/1992 3a. Date of Last Report 03/29/1994

4. FEI Number 65-0353335 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NANCY WHITE
3049 NE 163 STREET
N. MIAMI BEACH FL 33160

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 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 (agent or printed name of registered agent and Title & Address)

(NOTE: Registered Agent signature required when registering)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
P
SREDNI, ERWIN
3049 N.E. 163 ST.
N. MIAMI BEACH FL 33160

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY ST ZIP
D/P
SREDNI, ERWIN
3049 N.E. 163 ST
N. MIAMI BEACH, FL 33160

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
S
SREDNI, ISAAC
3049 N.E. 163 ST.
N. MIAMI BEACH FL 33160

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY ST ZIP
D/S
ISAAC SREDNI
3049 N.E. 163 ST
N. MIAMI BEACH, FL 33160

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), 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 AND TYPE ON FRONT OF DOCUMENT OR ON ATTACHMENT

3/16/95

(305) 945-0405