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FILED
Feb 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V27745 (1)
1. Corporation Name
SHONIAD CORPORATION



Principal Place of Business Mailing Address
223 E. FLAGLER STREET 223 E. FLAGLER STREET
M-21 M-21
MIAMI FL 33132 MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		04/10/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0334540	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		30		8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		31		Trust Fund Contribution	
29		32		5.00 May Be Added to Fees	
33		34		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
35		36		Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LERMAN, ISIDORO
48 E. FLAGLER STREET
PENTHOUSE 101
MIAMI FL 33131

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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, 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	P	DELETE	1.1 TITLE	Change	Addition
NAME	KOBROWSKI, ELIAS		1.2 NAME		
STREET ADDRESS	223 E. FLAGLER STREET, SUITE M-21		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33132		1.4 CITY-ST-ZIP		
TITLE	AS	DELETE	2.1 TITLE	Change	Addition
NAME	HARRIS, ELLIOTT		2.2 NAME		
STREET ADDRESS	111 S.W. 3 STREET, SIXTH FLOOR		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33130		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	Change	Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change	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:

Elias Kobrowski Pres. dat 1/23/98

CR2E034 (10/97)