

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

FILED
Feb 11 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 # **V70608** (7)
1. Corporation Name
S & F INNOVATIONS, INC.

Principal Place of Business 4413 W. ALVA STREET TAMPA FL 33614 US	Mailing Address 4413 W. ALVA STREET TAMPA FL 33614 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/06/1992	
21 Suite, Apt. #, etc. 4413 W. ALVA ST	26 Suite, Apt. #, etc. 4413 W. ALVA ST	4. FEI Number 59-3130471		Applied For <input type="checkbox"/> Not Applicable	
22 City & State TAMPA, FL	27 City & State TAMPA, FL	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip 33614	28 Country USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip 33614	25 Country USA	29 Zip 33614		30 Country USA	

9. Name and Address of Current Registered Agent SHIRE, WILLIAM 4413 W. ALVA STREET TAMPA FL 33614		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable) 4413 W. ALVA ST	
83		84 City TAMPA	
85 State FL		86 Zip Code 33614	

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 *X William Shire* DATE **2/4/98**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D SHIRE, WILLIAM	1.2 NAME	SHIRE, WILLIAM
STREET ADDRESS	12121 LITTLE RD	1.3 STREET ADDRESS	4413 W ALVA ST.
CITY-ST-ZIP	HUDSON FL	1.4 CITY-ST-ZIP	TAMPA, FL 33614
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D SHIRE, JULIE	2.2 NAME	SHIRE, JULIE
STREET ADDRESS	12121 LITTLE RD	2.3 STREET ADDRESS	4413 W ALVA ST
CITY-ST-ZIP	HUDSON FL	2.4 CITY-ST-ZIP	TAMPA, FL 33614
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CP OLIVER, JOSEPH	3.2 NAME	CP OLIVER, JOSEPH
STREET ADDRESS	12121 LITTLE ROAD	3.3 STREET ADDRESS	4413 W ALVA ST
CITY-ST-ZIP	HUDSON FL	3.4 CITY-ST-ZIP	TAMPA, FL 33614
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: *X William Shire* DATE: **2/4/98**

CP2E034 (1097)