

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111689

Entity Name: SHACHAH, INC.

FILED  
Jan 13, 2011  
Secretary of State

**Current Principal Place of Business:**

809 E BLOOMINGDALE AVE  
BRANDON, FL 33511

**New Principal Place of Business:**

123 W BLOOMINGDALE AVE  
BRANDON, FL 33511

**Current Mailing Address:**

3433 LITHIA PINECREST ROAD  
#104  
VALRICO, FL 33596

**New Mailing Address:**

123 W BLOOMINGDALE AVE  
BRANDON, FL 33511

FEI Number: 59-3692720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARMER, SANDY D  
238 MYSTIC FALLS DR  
APOLLO BEACH, FL 33572 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FARMER, SANDY D  
Address: 238 MYSTIC FALLS DR  
City-St-Zip: APOLLO BEACH, FL 33572

Title: D  
Name: FARMER, JONATHAN M  
Address: 238 MYSTIC FALLS DR  
City-St-Zip: APOLLO BEACH, FL 33572

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SANDY D FARMER

PRES

01/13/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date