

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008536

FILED
Apr 12, 2007
Secretary of State

Entity Name: DRY SHORE INC.

Current Principal Place of Business:

119 WASHINGTON AVENUE
SUITE 500
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

119 WASHINGTON AVENUE
SUITE 500
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0821689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOFI ONE, INC.
119 WASHINGTON AVE
SUITE 500
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SECCO, ANDREA
Address: VIA GUIZZETTI 73
City-St-Zip: DOSSON DI CASIER TV-31030 IT, IT ITALY

Title: STD () Delete
Name: SECCO, LORENZO
Address: VIA GUIZZETTI 73
City-St-Zip: DOSSON DI CASIER TV-31030 IT, IT ITALY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDREA SECCO

P

04/12/2007

Electronic Signature of Signing Officer or Director

_____ Date