## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 23, 2008 08:00 AN ıte

DOCUMENT # S84250  1. Entity Name SHOPFINDERS, INC.		Secretary of Sta
Principal Place of Business  615 BRICKELL KEY DRIVE BAY "G" MIAMI, FL 33131 US  MIAMI, FL 33131 US		
DO NOT WRITE IN THIS SI	PACE	04182008 No Chg-P CR2E034 (11/05)  4. FEI Number
DAJER, MARTHA 615 BRICKELL KEY DR MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed rappe of registered epent and title if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE		
FILE NOW!!! FEE S \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaig Trust Fund Contri		00 May Be and to Fees
10. OFFICERS AND DIRECTORS  TITLE VP NAME DAJER, MARTHA STREET ADDRESS CITY-ST-ZIP MIAMI, FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000916437 05/13/08-80001-004 150.00
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME		DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS CITY-SI-ZIP		
INTLE NAME STREET ADDRESS CITY: ST-ZIP  12. Liberely contify that the information supplied with this filling does not qualify for	the exemplians contained	in Chapter 119. Florida Statutes I higher cartify that the information
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this repon or supplemental 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 pr trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date		