## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 572433**

Title:

Name:

Address:

City-St-Zip:

Entity Name: SHAMIRA HOLDING CORP., INC.

FILED Sep 22, 2009 Secretary of State

Entity Nai	me: Shamir/	A HOLDING CORP., INC.					
Current Principal Place of Business:				New Principal Place of Business:			
SUITE 618		ST CANADA, - M4P1K5					
Current Mailing Address:				New Mailing Address:			
SUITE 618		ST SANADA, - M4P1K5					
FEI Number:	: 59-1822641	FEI Number Applied For ( )	FEI Num	ber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
100 SE 2N		RT, VOGEL & MANDLER, P.A. 900					
	named entity e of Florida.	submits this statement for the	purpose of	changing i	ts registere	d office or registered agent, or bo	oth,
SIGNATU							
	Electror	nic Signature of Registered Ag	jent			Date	
Election Car		(3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).		•		ES TO OFFICERS AND DIREC	TODS:
Title: Name: Address: City-St-Zip:	P ( KLEIN, VIKTOR 234 EGLINTON	) Delete		ADDITION Title: Name: Address: City-St-Zip:	DP KLEIN, HAII 234 EGLIN	(X) Change ( ) Addition	ioks:
Title: Name: Address: City-St-Zip:	KLEIN, HAIM 234 EGLINTON	) Delete I AVE, EAST, SUITE 618 IARIO, CANADA, - M4P1K5		Title: Name: Address: City-St-Zip:	VP KLEIN, SHA 5835 N. BA MIAMI BEA		
Title: Name: Address: City-St-Zip:	V ( KLEIN, SHAMII 5835 N. BAY R MIAMI BEACH,	OAD		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition IY 'H BAY ROAD CH, FL 33140	

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: AMY SEGAL VP 09/22/2009

(X) Delete

5481 NORTH BAY ROAD

MIAMI BEACH, FL 33140

SEGAL, AMY

() Change () Addition