

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070681

**Entity Name:** SHAIN ENTERPRISES INC

**Current Principal Place of Business:**

13245 ATLANTIC BLVD  
SUITE 4-314  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

13245 ATLANTIC BLVD  
STE 4-314  
JACKSONVILLE, FL 32225 US

**FEI Number:** 27-3440490

**Certificate of Status Desired:** No

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

SHAIN, WILLIAM  
13245 ATLANTIC BLVD  
STE 4-314  
JACKSONVILLE, FL 32225 US

*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

**Officer/Director Detail :**

Title            P  
Name            SHAIN, WILLIAM  
Address        13245 ATLANTIC BLVD  
                  STE 4-314  
City-State-Zip: JACKSONVILLE FL 32225

Title            MANAGER  
Name            SHAIN, WILLIAM C  
Address        13245 ATLANTIC BLVD  
                  STE 4-314  
City-State-Zip: JACKSONVILLE FL 32225

*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:** WILLIAM SHAIN

**PRESIDENT**

**06/19/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date