


**2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 228814**

1. Entity Name  
**SHOLOM HOUSE, INC.**



Principal Place of Business      Mailing Address

**260 OCEAN DR.  
 MAIL BOX 40  
 MIAMI BEACH FL 33139**      **260 OCEAN DR.  
 MAIL BOX 40  
 MIAMI BEACH FL 33139**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



1st MOORE      CR2E034 (10/05)

4. FEI Number      Applied For Not Applicable

**59-8082275**

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GALLARDO, LENIER  
 260 OCEAN DR #26  
 MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

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 *Dr. Lenier Gallardo* X *President* X *Feb 1, 2006* DATE

Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing      \$5.00 May be Added to Fee

Trust Fund Contribution.     

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	GALLARDO, LENIER	260 OCEAN DRIVE, #26	MIAMI BEACH FL 33139	<input type="checkbox"/>
TS	BODOLAY, STEVE	260 OCEAN DRIVE, #27	MIAMI BEACH FL 33139	<input type="checkbox"/>
D	GOVANTES, LUIS	260 OCEAN DRIVE, #33	MIAMI BEACH FL 33139	<input type="checkbox"/>
D	FRANCOIS, WILBUR	260 OCEAN DRIVE, #12/A	MIAMI BEACH FL 33139	<input type="checkbox"/>
D	GARDNER, ALAN	260 OCEAN DRIVE, #24	MIAMI BEACH FL 33139	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

U00000416329  
 02/13/06-80011-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report 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 or 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: *Steve Bodolay*      2/1/06      305-673-4881