

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 254615

Entity Name: SHEILA SHINE INC

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

1201 N W FIRST AVE
MIAMI, FL 331362807 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 01-6186
MIAMI, FL 331016186 US

New Mailing Address:

FEI Number: 59-0954793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACH, WILLIAM S
1201 NW 1ST AVE
MIAMI, FL 33136 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: PDT () Delete
Name: WALLACH, WILLIAM S,
Address: 11 ISLAND AVE. APT #1112
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: WALLACH, JAMES G
Address: 2755 S PARKVIEW DR
City-St-Zip: HALLANDALE, FL 33009

Title: V (X) Delete
Name: GREENE, RITA WALLACH
Address: 11 ISLAND AVE APT #1112
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: WALLACH, JAMES G
Address: 2755 S. PARKVIEW DR
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JAMES G. WALLACH

VP

02/05/2009

Electronic Signature of Signing Officer or Director

Date