

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 254615

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** SHEILA SHINE INC

**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 (X)**

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

WALLACH, JAMES G  
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:** DPST  
**Name:** WALLACH, JAMES G  
**Address:** 1201 NW FIRST AVENUE  
**City-St-Zip:** MIAMI, FL 33136

**Title:** DV  
**Name:** WALLACH, DAVID J  
**Address:** 1201 NW FIRST AVENUE  
**City-St-Zip:** MIAMI, FL 33136

**Title:** DV  
**Name:** WALLACH, WILLIAM  
**Address:** 1201 NW FIRST AVENUE  
**City-St-Zip:** MIAMI, FL 33136

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:** JAMES G. WALLACH

PDT

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date