

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 291629

FILED
Apr 08, 2005
Secretary of State

Entity Name: SHAMROCK JEWELERS INC

Current Principal Place of Business:

% BARRY GODOWN
1061 E. INDIANTOWN RD., #104
JUPITER, FL 33477

New Principal Place of Business:

% BARRIE GODOWN
1061 E. INDIANTOWN RD., #104
JUPITER, FL 33477

Current Mailing Address:

% BARRY GODOWN
1061 E. INDIANTOWN RD., #104
JUPITER, FL 33477

New Mailing Address:

% BARRIE GODOWN
1061 E. INDIANTOWN RD., #104
JUPITER, FL 33477

FEI Number: 59-1104849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMPSON, ANTHONY T
% S. BARRIE GODOWN, CPA
1061 E. INDIANTOWN ROAD, #104
JUPITER, FL 33477 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: PT () Delete
Name: SIMPSON, ANTHONY T
Address: 530 OYSTER RD
City-St-Zip: N PALM BEACH, FL

Title: VP () Delete
Name: SIMPSON, DEBRA S
Address: 530 OYSTER RD
City-St-Zip: N PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: SIMPSON, ANTHONY T
Address: 530 OYSTER RD
City-St-Zip: N PALM BEACH, FL 33408

Title: VP (X) Change () Addition
Name: SIMPSON, DEBRA S
Address: 530 OYSTER RD
City-St-Zip: N PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY T. SIMPSON

PRES

04/08/2005

Electronic Signature of Signing Officer or Director

Date