2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# 471861

Entity Name: SHIFCO, INC.

Current Principal Place of Business:

2254 W. 77TH AVE
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2254 W. 77TH AVE
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 59-1579671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEISE, MICHEL
SUITE 303 ROLAND CONTINENTAL PLAZA
3250 MARY STREET
MIAMI, FL 33133 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: C ( ) Delete
Name: HENRY B. LESHMAN,
Address: 7508 LA PAZ CT #201
City-St-Zip: BOCA RATON, FL 33433

Title: P ( ) Delete
Name: MARK E. PLATT,
Address: 18182 BLUE LAKE WAY
City-St-Zip: BOCA RATON, FL 33498

Title: TS ( ) Delete
Name: HYLLORI L. LESHMAN,
Address: 6229 OLD COURT RD #205
City-St-Zip: BOCA RATON, FL 33433

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:

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: HYLLORI L. LESHMAN TS 05/31/2005

Electronic Signature of Signing Officer or Director — Date