## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 597793** 

FILED Apr 28, 2009 Secretary of State

Entity Name: SHIRLART FLORIDA INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:		
UITE 80	N STREET I A, FL 34236			
urrent M	lailing Addre	ss:	New Mailing Addres	ss:
UITE 80	N STREET I A, FL 34236			
El Number	: 59-1923205	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
990 MAIN SUITE 801	NING, RENEA N STREET I A, FL 34236			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
the Stat	e of Florida. RE:			ed office or registered agent, or both,
the Stat	e of Florida. RE:	submits this statement for the nic Signature of Registered Ag		ed office or registered agent, or both,  Date
the Stat	e of Florida.  RE: Electro			
the State	e of Florida.  RE: Electro	nic Signature of Registered Ag	ent	
the State	e of Florida.  RE: Electro  mpaign Financin  S AND DIREC	nic Signature of Registered Ag ng Trust Fund Contribution ( ). CTORS: ) Delete DNEY R AVENUE W.	ent	Date
n the Stati IGNATU Iection Car DFFICER itle: ame: ddress:	e of Florida.  RE:  Electro  mpaign Financin  S AND DIREC  SD ( SUSSMAN, SII 202 ST. CLAIR TORONTO, ON	nic Signature of Registered Ag  ig Trust Fund Contribution ( ).  CTORS:  ) Delete  DNEY  R AVENUE W.  JT CAN,  ) Delete  H.  AVE. WEST	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTOR

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: A.H. SUSSMAN PD 04/28/2009