## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED ANNUAL REPORT Apr 21, 2008 08:00 AN Secretary of State **DOCUMENT # F93000001156** 1. Entity Name WHITTALL & SHON, INC. Principal Place of Business Mailing Address 2150 NW MIAMI COURT 2150 NW MIAMI COURT MIAMI, FL 33127 MIAMI, FL 33127 04182008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-2961640 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITTALL, ELIOT DO NOT WRITE 1000 SOUTH POINTE DRIVE, #1201 MIAMI BEACH, FL 33139 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) H0000913370 05/08/08-80013-014 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE WHITTALL, ELIOT 1000 S. POINTE DRIVE, #1201 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 IIILE SHON, RICHARD NAME 1000 S. POINTE DRIVE, #1201 STREET ADDRESS CITY-ST-7IP MIAMI BEACH, FL 33139 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: / Mue

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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