

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H35758

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: SHELLEY SIMON ASSOCIATES, INC.

## Current Principal Place of Business:

33 SE 4TH ST  
SUITE 101  
BOCA RATON, FL 33432 US

## New Principal Place of Business:

2650 NW 42 STREET  
BOCA RATON, FL 33434 US

## Current Mailing Address:

404 E. ATLANTIC BLVD.  
SUITE 101  
POMPANO BEACH, FL 33060 US

## New Mailing Address:

FEI Number: 59-2482050      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSENTHAL, STUART S ESQ  
404 E. ATLANTIC BLVD.  
SUITE 101  
POMPANO BEACH, FL 33060 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: PD ( ) Delete  
Name: SIMON, SHELLEY  
Address: 33 SE 4TH ST  
City-St-Zip: BOCA RATON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SIMON, SHELLEY  
Address: 2650 NW 42 STREET  
City-St-Zip: BOCA RATON, FL 33434

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: SHELLEY SIMON

P

04/26/2005

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

\_\_\_\_\_  
Date