

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H62631

FILED
Jan 29, 2009
Secretary of State

Entity Name: DESIGNS BY SHANE! INC.

Current Principal Place of Business:

203 DIXIE BLVD
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

203 DIXIE BLVD
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 59-2549607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFREY HAHN, CPA, PA
1555 N. FEDERAL HIGHWAY SUITE 300
BOCA RATON, FL 33432 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: P () Delete
Name: AMES, SHANE
Address: 800 N OCEAN BLVD-#5
City-St-Zip: DELRAY BCH, FL

Title: D () Delete
Name: CARABALLO, RAMON
Address: 800 N OCEAN BLVD #5
City-St-Zip: DELRAY BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AMES, SHANE
Address: 800 N OCEAN BLVD-#5
City-St-Zip: DELRAY BCH, FL 33483

Title: D (X) Change () Addition
Name: CARABALLO, RAMON
Address: 800 N OCEAN BLVD #5
City-St-Zip: DELRAY BEACH, FL 33483

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: SHANE AMES

PRES

01/29/2009

Electronic Signature of Signing Officer or Director

Date