2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M32620

LEWIN, CURT

2805 NO STATE ROAD #7

HOLLYWOOD, FL 33021

Name:

Address:

City-St-Zip:

FILED Jan 20, 2009 Secretary of State

Entity Name: SHAY OF MIAMI, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TH STATE RO OD, FL 3302				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	TH STATE RO OD, FL 3302				
FEI Number:	59-2693046	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
FEDERICI, SONDRA 2805 N. STATE ROAD 7 HOLLYWOOD, FL, FL 33021 US				FEDERICI, SONDRA 2805 N. STATE ROAD 7 HOLLYWOOD, FL 33021 US	
The above in the State		submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: SONDRA FEDERICI				01/20/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FEDERICI, SO	STATE ROAD 7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (LEWIN, NAOM 2805 NO STAT HOLLYWOOD	E ROAD #7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (FEDERICI, JAI 2805 NO STAT HOLLYWOOD	E ROAD #7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (HERNANDEZ, 2805 NO STAT HOLLYWOOD	E ROAD #7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: SONDRA FEDERICI SEC 01/20/2009