

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90395

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: SHEILA SHERBERT, INC.

**Current Principal Place of Business:**

9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

**Current Mailing Address:**

9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS, FL 33410 US

**New Mailing Address:**

FEI Number: 65-0071240      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHERBERT, SHEILIA S.  
9840 ALTERNATE A1A  
STE. 401  
PALM BEACH GARDENS, FL 33410 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: TSD ( ) Delete  
Name: SHERBERT,SHEILA,  
Address: 9840 ALTERNATE A1A, STE. 401  
City-St-Zip: PALM BEACH GARDENS, FL

Title: P ( ) Delete  
Name: SHERBERT,SHEILA,  
Address: 9840 ALTERNATE A1A, STE. 401  
City-St-Zip: PALM BEACH GARDENS, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TSD (X) Change ( ) Addition  
Name: SHERBERT,SHEILA,  
Address: 9840 ALTERNATE A1A, STE. 401  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P (X) Change ( ) Addition  
Name: SHERBERT,SHEILA,  
Address: 9840 ALTERNATE A1A, STE. 401  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: SHEILA SHERBERT

PRES

04/26/2008

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

\_\_\_\_\_ Date