2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N0000001208

FILED Mar 27, 2006 8:00 am Secretary of State 03-27-2006 90253 026 ****61.25

1. Entity Name SHADDAI TEMPLE HOLDING CORPORATION)	130×-		
Principal Place of Business 1101 W. 19TH ST. PANAMA CITY, FL 32405 Mailing Address P.O. BOX 16115 PANAMA CITY, FL 32406								10/1 20/2 1187 187 1 88 18	
Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01032006 C	Chg-NP	CR2E037 (11/05)	
City & State			City & State			4. FEI Number Applied For 59-2477193 Not Applicable			
Zip			Zip			5. Certificate of S		See Require	
	6. Name	and Address of Currer	nt Registered Agent		Name -	7. Name and Add			
SYFRETT, RAYMOND 311 MAGNONA AVE.					Street Address (P.O. Box Number is Not Acceptable)				
PANAMACITY, PL 3240									
					City	or Ott.		FL Zingg	^{1e} 401
	named entitions of regis	ty submits this statement tered agent.	for the purpose of chan	ging its register		ered agent, or both, in	n the State of Flori	da. I am familiar with	and accept
SIGNATURE	Slemajure, typed	d or printed name of registered age	ant and title if applicable.	(NOTE: Registere	d Agent signature requi	rad when reinstating)	/-/	DATE	1,000
	<u> </u>								
	_	e is \$61.25 May 1, 2006		tion Campaign F t Fund Contribut		\$5.00 May Be Added to Fees		ke check payable to la Department of S	
10.	Due by N		Trus			Added to Fees	Florid	ia Department of S	N 10
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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 orath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an agencies, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

3.14-06

850-769-8303 Daytine Phone #