2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N03000000185

Entity Name: SHAMMAH INC.

Current Principal Place of Business:

PMB #104
7684 N. NOB HILL ROAD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

PMB #104
7684 N. NOB HILL ROAD
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 30-0146687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES, PHYLLIS
2830 NW 15TH STREET
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

JONES, PHYLLIS M
7848 CATALINA CIRCLE
TAMARAC, FL 33321 US

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: PHYLLIS M JONES 04/30/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: JONES, PHYLLIS
Address: 2830 NW 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VD ( ) Delete
Name: JONES, BERNICE
Address: 2830 NW 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: SD ( ) Delete
Name: JONES, SYLVESTER
Address: 105 MILNE STREET #3
City-St-Zip: BRIDGEPORT, CT 06604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: JONES, PHYLLIS
Address: 7848 CATALINA CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS M JONES P 04/30/2004
Electronic Signature of Signing Officer or Director Date