

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001381

FILED
Jul 11, 2005
Secretary of State

Entity Name: SHAREKINDESS INC.

Current Principal Place of Business:

1395 CORAL WAY
CORAL GABLES, FL 33145

New Principal Place of Business:

1395 CORAL WAY
3RD FLOOR
MIAMI, FL 33145

Current Mailing Address:

1395 CORAL WAY
CORAL GABLES, FL 33145

New Mailing Address:

1395 CORAL WAY
3RD FLOOR
MIAMI, FL 33145

FEI Number: 20-0734649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VALENZUELA, SMILKA MELGOZA
Address: 1395 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33145

Title: D () Delete
Name: VALENZUELA ROMERO, JORGE LUIS
Address: 1395 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33145

Title: D () Delete
Name: MELGOZA, CESAR M
Address: 1395 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VALENZUELA, SMILKA MELGOZA
Address: 1395 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

Title: D (X) Change () Addition
Name: VALENZUELA ROMERO, JORGE LUIS
Address: 1395 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

Title: D (X) Change () Addition
Name: MELGOZA, CESAR M
Address: 1395 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

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: SMILKA MELGOZA

D

07/11/2005

Electronic Signature of Signing Officer or Director

Date