



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000007197 1. Entity Name SHARK FOUNDATION, INC.				FILED 08 MAY -6 AM 8:20 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2665 S. BAYSHORE DR. SUITE 703 MIAMI, FL 33133		Mailing Address 2665 S. BAYSHORE DR. SUITE 703 MIAMI, FL 33133			
DO NOT WRITE IN THIS SPACE				04212008 No Chg-NP CR2E037 (4/06)	
4. FEI Number 65-0903122				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WORLD CORPORATE SERVICES, INC 2665 S BAYSHORE DR SUITE 703 MIAMI, FL 33133				DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		DO NOT WRITE IN THIS SPACE	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GODNECHT, ALEXANDER 2665 S BAYSHORE DR #703 MIAMI, FL 33133				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD THORBECKE, HEINRICH 2665 S. BAYSHORE DR, #703 MIAMI, FL 33133				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS RICHARDS, TIMOTHY D 2665 S BAYSHORE DR STE 703 MIAMI, FL 33133				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Timothy D. Richards</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				4-24-08 (305) 858-9900 <small>Date Daytime Phone #</small>	