

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113020

FILED
Apr 16, 2007
Secretary of State

Entity Name: SHORE MANAGEMENT CORP.

Current Principal Place of Business:

PO BOX 480145
FORT LAUDERDALE, FL 33348

New Principal Place of Business:

2100 SALZEDO STREET
SUITE 201
CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 480145
FORT LAUDERDALE, FL 33348

New Mailing Address:

FEI Number: 65-1072312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PONN, DENNIS
1525 N. PARK DR
STE 102
FORT LAUDERDALE, FL 33326 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: PRES () Delete
Name: SHELDON, SHORE
Address: P.O. BOX 480145
City-St-Zip: FT. LAUDERDALE, FL 33348

Title: VP () Delete
Name: JOSE, LLAVORE
Address: P.O. BOX 480145
City-St-Zip: FT. LAUDERDALE, FL 33348

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JOSE LLAVORE

VP

04/16/2007

Electronic Signature of Signing Officer or Director

_____ Date