2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

FILED Jan 10, 2008 08:00 AM **DOCUMENT # P01000035411** Secretary of State DAVID SHORES ENTERPRISES, INC. Principal Place of Business Mailing Address 2984 DEKLE STREET 2984 DEKLE STREET MARIANNA, FL 32448 MARIANNA, FL 32448 01052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3702913 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE SHORES, DAVID B 2984 DEKLE STREET MARIANNA, FL 32448 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Added to Fees Trust Fund Contribution. . After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **DPVS** TITLE NAME SHORES, DAVID B STREET ADDRESS 2984 DEKLE STREET CiTY-ST-ZIP MARIANNA, FL 32448 U00000777610 01/10/08-80015-010 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME! STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE DILE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if neni/with an address, with all other like empowered.