## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # P01000100596

1. Entity Name

SHAPIRO VENTURES, INC.

Principal Place of Business -

1800 N.E. 114TH ST., APT. 1610 MIAMI, FL 33181

Mailing Address

9100 SO. DADELAND BLVD # 1600

MIAMI, FL 33156

## **FILED** Mar 24, 2008 08:00 A **Secretary of State**



DO NOT WRITE IN THIS SPACE

01032008 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1145762

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAPIRO, BARBARA

1800 N.E. 114TH ST., APT. 1610

MIAMI, FL 33181

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the poors of registered agent.	urpose of changing its registe	ered office or r	egistered agent, or bo	th, in the State of Florida I am familiar with, and accept	
	the state of the s			, ,		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating).  DATE						
					U00000857653:	
FILE NOW!!! FEE IS \$150.00		9. Election Campaign Financing		\$5.00 May Be	94/08/08-80081-003 150.DN	
After Ma	By 1, 2008 Fee will be \$550.00	Trust Fund Contribution	וי: ר	Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE	D				• •	
NAME	SHAPIRO, BARBARA					
STREET ADDRESS	s   1800 N.E. 114TH ST., APT. 1610					
CITY+\$T-ZIP	MIAMI, FL 33181		ľ	•		
TITLE	D					
NAME	SHAPIRO, NORMAN	•				
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12. Thereby certify that the informatio indicated on this report or supply of the corporation or the receiver changed, or on an attachment with qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an officer or director is eport as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

SIGNATURE: X

STREET ADDRESS CITY-ST-ZIP