


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2004 8:00 am
Secretary of State

06-02-2004 90001 007 ***150.00

DOCUMENT # P01000120953

1. Entity Name
 SHEA'S PRO SHOP INC.



Principal Place of Business
 6310 103RD STREET
 JACKSONVILLE, FL 32210

Mailing Address
 5900 TOWNSEND ROAD
 APT 1335
 JACKSONVILLE, FL 32244

54056344



2. Principal Place of Business
 12548 Wages Way West
 Suite, Apt. #, etc.

3. Mailing Address
 12548 Wages Way West
 Suite, Apt. #, etc.

05182004 Chg-P CR2E034 (10/03)

City & State
 Jacksonville, FL

City & State
 Jacksonville, FL

Zip
 32218

Country
 USA

Zip
 32218

Country
 USA

4. FEI Number
 01-0549479

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIERSCHKE, REINHARD H
 5900 TOWNSEND ROAD
 APT 1335
 JACKSONVILLE, FL 32244

7. Name and Address of New Registered Agent

Name
 Pierschke, Reinhard H.


Street Address (P.O. Box Number is Not Acceptable)
 12548 Wages Way West

City
 Jacksonville

State
 FL

Zip Code
 32218

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  Reinhard H. Pierschke

(NOTE: Registered Agent signature required when reinstating)

DATE
 6/1/04

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

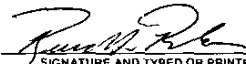
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	PIERSCHKE, REINHARD H	5900 TOWNSEND ROAD, #1335	JACKSONVILLE, FL 32244	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	DI/TFP Pierschke, Reinhard H.	12548 Wages Way West	Jacksonville, FL 32218	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Reinhard H. Pierschke

Date
 6/1/04

Daytime Phone #
 904-241-2533