

**2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 05, 2011  
Secretary of State**

DOCUMENT# P02000004530

Entity Name: SHAMROCK CORPORATE HOUSING CORPORATION

**Current Principal Place of Business:**

**New Principal Place of Business:**

4001 N. PINE ISLAND RD.  
SUNRISE, FL 33351

**Current Mailing Address:**

**New Mailing Address:**

4001 N. PINE ISLAND RD.  
SUNRISE, FL 33351

FEI Number: 02-0541948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CHUMAN, CARLOS Z  
4001 N. PINE ISLAND RD.  
SUNRISE, FL 33351 US

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CHUMAN, CARLOS Z  
Address: 4001 N. PINE ISLAND RD.  
City-St-Zip: SUNRISE, FL 33351

Title: VP  
Name: CHUMAN, ROSA M  
Address: 4001 N. PINE ISLAND RD.  
City-St-Zip: SUNRISE, FL 33351

Title: D  
Name: RUIZ, CARLOS A  
Address: 4001 N. PINE ISLAND RD.  
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: CARLOS RUIZ

D

05/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date