


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000045102


1. Entity Name
 SHELAN CORP.



Principal Place of Business Mailing Address

10265 TAMiami TRAIL NORTH 10265 TAMiami TRAIL NORTH
 NAPLES, FL 34108 NAPLES, FL 34108

DO NOT WRITE IN THIS SPACE



05102005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 01-0672200 Not Applicable

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

6. Name and Address of Current Registered Agent

RAMTAHAL, SHERRY L
 6001 HOLLOW DRIVE
 NAPLES, FL 34112

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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 _____ (NOTE: Registered Agent signature required when transferring) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

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	P
NAME	RAMTAHAL, SHERRY L
STREET ADDRESS	6001 HOLLOW DRIVE
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	V
NAME	RAMTAHAL, RAWLE
STREET ADDRESS	6001 HOLLOW DRIVE
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Rawle Ramtahal - Rawle Ramtahal 5/10/05 239-593-6442

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #