2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000086944

1. Entity Name
SHOMA XXI, INC.

Principal Place of Business	Mailing Address
5835 BLUE LAGOON DRIVE 4RTH FLOOR MIAMI, FL 33126	5835 BLUE LAGOON DRIVE 4RTH FLOOR MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
51-0431831	Not Applicable

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

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE
28TH FLOOR
MIAMI, FL 33131

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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.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00
Due by September 12, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHOJAEE, MASOUD
STREET ADDRESS	5835 BLUE LAGOON DRIVE 4RTH FL
CITY ST ZIP	MIAMI, FL 33126

TITLE	D
NAME	LAMAS SHOJAEE, MARIA
STREET ADDRESS	5835 BLUE LAGOON DRIVE 4RTH FL
CITY ST ZIP	MIAMI, FL 33126

TITLE	D
NAME	MARTIN, TANIA
STREET ADDRESS	5835 BLUE LAGOON DRIVE 4RTH FL
CITY ST ZIP	MIAMI, FL 33126

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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 6/16/08   786-437-8585

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