

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106309

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: WEST KENDALL BOOKSHELF, INC.

**Current Principal Place of Business:**

12558 N KENDALL DR  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

9601 S DIXIE HWY  
MIAMI, FL 33156

**New Mailing Address:**

P.O. BOX 566177  
MIAMI, FL 332566177 US

FEI Number: 43-1980906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELLIOT, STUART G  
9601 S DIXIE HWY  
MIAMI, FL 33156 US

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

ELLIOT, STUART G  
8390 SW 97 ST.  
MIAMI, FL 33156 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: STUART G. ELLIOT

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ELLIOT, STEVEN D MR  
Address: 9601 S DIXIE HWY  
City-St-Zip: MIAMI, FL 331562804

Title: VPD ( ) Delete  
Name: ELLIOT, SHARON R  
Address: 9601 S DIXIE HWY  
City-St-Zip: MIAMI, FL 331562804

Title: STD ( ) Delete  
Name: ELLIOT, STUART G MR  
Address: 9601 S DIXIE HWY  
City-St-Zip: MIAMI, FL 331562804

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STUART G. ELLIOT

TR

04/25/2007

Electronic Signature of Signing Officer or Director

Date