

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142687

Entity Name: SHAPE GLOBALBIZ, INC.

FILED  
Apr 27, 2006  
Secretary of State

## Current Principal Place of Business:

2810-B KILKIERANE DRIVE  
TALLAHASSEE, FL 323092660 US

## New Principal Place of Business:

4081 GAMBLE ROAD  
MONTICELLO, FL 32344 US

## Current Mailing Address:

P.O. BOX 97  
LLOYD, FL 32337 US

## New Mailing Address:

FEI Number: 13-4270098

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CREMEANS, MARY ELEANOR  
2810-B KILKIERANE DRIVE  
TALLAHASSEE, FL 323092660 US

## Name and Address of New Registered Agent:

CREMEANS, MARY ELEANOR  
4081 GAMBLE ROAD  
MONTICELLO, FL 32344 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: MARY ELEANOR CREMEANS

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CREMEANS, MARY ELEANOR  
Address: 2810-B KILKIERANE DRIVE  
City-St-Zip: TALLAHASSEE, FL 323092660 US

Title: D ( ) Delete  
Name: BASAPPA, PRABHU DEVA  
Address: 7259 SYLVAN GLADE CT  
City-St-Zip: SPRING HILL, FL 34607 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CREMEANS, MARY ELEANOR  
Address: 4081 GAMBLE ROAD  
City-St-Zip: MONTICELLO, FL 32344 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY ELEANOR CREMEANS

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date