

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007529

FILED
Apr 20, 2009
Secretary of State

Entity Name: SHARK SIGNS INC

Current Principal Place of Business:

5301 NW 15TH ST
D-18
MARGATE, FL 33063

New Principal Place of Business:

12717 W SUNRISE BLVD
166
SUNRISE, FL 33323

Current Mailing Address:

5301 NW 15TH ST
D-18
MARGATE, FL 33063

New Mailing Address:

12717 W SUNRISE BLVD
166
SUNRISE, FL 33323

FEI Number: 20-0605682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALA, GUSTAVO A
1701 NW 107 TERRACE
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JARAMILLO, LINA MARIA
Address: 1701 NW 107 TERRACE
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete
Name: CALA, GUSTAVO
Address: 1701 NW 107 TERRACE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GUSTAVO A CALA

OWN

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date