

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2005 8:00 am
Secretary of State

05-04-2005 90111 012 ***150.00

DOCUMENT # P04000018536 1. Entity Name SHIREL PROPERTIES, INC.																			
Principal Place of Business 444 BRICKELL AVE. SUITE 300 MIAMI, FL 33131		Mailing Address 444 BRICKELL AVE. SUITE 300 MIAMI, FL 33131																	
2. Principal Place of Business 2950 SW 27 Avenue Suite, Apt. #, etc. Suite 300 City & State Miami FL Zip 33133 Country USA		3. Mailing Address 2950 SW 27 Avenue Suite, Apt. #, etc. Suite 300 City & State Miami FL Zip 33133 Country USA																	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FEI Number 20-2920772 Applied For ☐ Not Applicable																	
6. Name and Address of Current Registered Agent MERKIN, STEWART A ESQ. 444 BRICKELL AVE. SUITE 300 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Eduardo J. Garcia Street Address (P.O. Box Number is Not Acceptable) 2950 SW 27 Ave Suite 300 City miami FL Zip Code 33133																	
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: DATE: 4/28/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when ratifying)																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	☐ Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">President ☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>Sydney E. Saffer</td> </tr> <tr> <td>STREET ADDRESS</td> <td>2950 SW 27 Avenue #300</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Miami, FL 33133</td> </tr> </table>		TITLE	President ☐ Change ☒ Addition	NAME	Sydney E. Saffer	STREET ADDRESS	2950 SW 27 Avenue #300	CITY-ST-ZIP	Miami, FL 33133
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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: Sydney Saffer DATE: 4/28/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																			