## 2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P04000108975 1. Entity Name SHISHI GALLERY, INC. Principal Place of Business 3230 S. DIXIE HIGHWAY WEST PALM BEACH, FL 33405 US Mailing Address C/O MEYERS & ASSOC 5725 CORPORATE WAY, # 101 WEST PALM BEACH, FL 33407 US

FILED Feb 20, 2006 08:00 AN Secretary of State



## 01162006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1400097 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TRAMMELL, NIKKI D DO NOT WRITE 3230 S. DIXIE HIGHWAY WEST PALM BEACH, FL 33405 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 little if applicable, DATE (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS P.VP TITLE TRAMMELL, NIKKI D NAME STREET ADDRESS 3630 S. DIXIE HIGHWAY 11000000442569 WEST PALM BEACH, FL 33405 CITY-ST-ZIP 03/04/06-80023-014 150.00 TITLE TRAMMELL, NIKKI D NAME 3630 S, DIXIE HIGHWAY STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33405 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not quality 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:

TITLE

STREET ADDRESS
GITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
GITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/16/06 (561)301-9156 Date Dayling Phone 8