

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036387

FILED
Apr 10, 2006
Secretary of State

Entity Name: SHOPBEACHCOMBERS.COM INC.

Current Principal Place of Business:

402 BROADVIEW AVE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

402 BROADVIEW AVE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 20-2475102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANGASH, ASAD
504 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

BANGASH, ASAD
402 BROADVIEW AVE
ALTAMONTE SPRINGS, FL 32701 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: ASAD BANGASH

04/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BANGASH, ASAD
Address: 402 BROADVIEW AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P () Delete
Name: ROGERS, JODY
Address: 402 BROADVIEW AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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 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: ASAD BANGASH

P

04/10/2006

Electronic Signature of Signing Officer or Director

Date