2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087448

FILED Apr 20, 2007 Secretary of State

Entity Name: SHAKIBE, INC. **Current Principal Place of Business: New Principal Place of Business:** 4905 WEST SAN RAFAEL TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** P.O. BOX 13230 TAMPA, FL 336813230 FEI Number: 20-3020594 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JEFFRIES, DAVID M JEFFRIES, DAVID M BANK OF AMERICA PL., SUITE 3000 1227 N FRANKLIN STREET 101 EAST KENNEDY BOULEVARD TAMPA, FL 33602 TAMPA, FL 336025884 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: DAVID M. JEFFRIES 04/20/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition SASSE, SHANNON Name: Name: 4905 W. SAN RAFAEL Address: Address: TAMPA, FL 33629 City-St-Zip: City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: LAYNE, REBECCA Name: 4905 W. SAN RAFAEL Address: Address: TAMPA, FL 33629 City-St-Zip: 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: REBECCA LAYNE 04/20/2007 ٧