

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000105878

1. Entity Name
P&C SHIELD CORPORATION



Principal Place of Business

13705 SOUTHWEST 30 STREET
MIAMI, FL 33175

Mailing Address

13705 SOUTHWEST 30 STREET
MIAMI, FL 33175



06122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3244418

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, ALEJANDRO T
13705 SOUTHWEST 30 STREET
MIAMI, FL 33175

**DO NOT WRITE
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]*
Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

6/13/07

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FERNANDEZ, ALEJANDRO
STREET ADDRESS	13705 SOUTHWEST 30 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	D
NAME	FERNANDEZ, ALEJANDRO T
STREET ADDRESS	13705 SOUTHWEST 30 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/20/07-80004-007 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/13/07 *786-252-7947*