2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000118768

Entity Name: SHAKWIR ENTERPRISES, INC.

FILED Apr 20, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

6301 S WESTSHORE BLVD UNIT 1022 6301 SOUTH WESTSHORE BLVD. TAMPA, FL 33616

UNIT 1022

TAMPA, FL 33616

Current Mailing Address: New Mailing Address:

6301 S WESTSHORE BLVD UNIT 1022 6301 SOUTH WESTSHORE BLVD. TAMPA, FL 33616

UNIT 1022

TAMPA, FL 33616

FEI Number: 36-4579816 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:

MIZIO, ARMANDO F MIZIO, ARMANDO F 25400 US 19 N SUITE 210 25400 U.S. HWY. 19 NORTH US CLEARWATER, FL 33763 SUITE 210

CLEARWATER, FL 33763 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: ARMANDO F. MIZIO 04/20/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SHAKWIR, BADRELDIN SHAKWIR, BADRELDIN H Name: Name: 6301 S WESTSHORE BLVD UNIT 1022 6301 SOUTH WESTSHORE BLVD-UNIT 1022 Address: Address:

City-St-Zip: TAMPA, FL 33616 City-St-Zip: TAMPA, FL 33616

Title: () Delete Title: **VPSD** () Change (X) Addition

SHAKWEER, WALID H Name: Name:

Address: 4850 HERON POINTE DRIVE - UNIT 421 Address:

TAMPA, FL 33616 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: BARELDIN H. SHAKWIR PTD 04/20/2006