

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086467

FILED
Jan 21, 2009
Secretary of State

Entity Name: SHARMOUR ENTERPRISES INC.

Current Principal Place of Business:

1700 N. DIXIE HWY., STE. 150
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1700 N. DIXIE HWY., STE. 150
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 20-5140803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, ANDREW
1000 S. PINE ISLAND RD., STE. 250
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

KRAMER, ANDREW
490 SAWGRASS CORPORATE PARKWAY
SUITE 100
SUNRISE, FL 33325 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILLMAN, SEYMOUR
Address: 1700 N. DIXIE HWY., STE. 150
City-St-Zip: BOCA RATON, FL 33432

Title: ST () Delete
Name: SMITH, JANE
Address: 1700 N. DIXIE HWY., STE. 150
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GILLMAN, SHARON
Address: 1700 N. DIXIE HWY., STE. 150
City-St-Zip: BOCA RATON, FL 33432

Title: D () Change (X) Addition
Name: KRAMER, ANDREW
Address: 490 SAWGRASS CORPORATE PARKWAY #100
City-St-Zip: SUNRISE, FL 33325 US

I hereby certify that the information supplied with this filing does not qualify 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: SEYMOUR GILLMAN

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date