

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089358

Entity Name: SHEMANTO STATION INC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

6715 SOUTH DIXIE HWY
WEST PALM BEACH, FL 33405 US

Current Mailing Address:

6715 SOUTH DIXIE HWY
WEST PALM BEACH, FL 33405 US

New Principal Place of Business:

5709 AUSTRALIAN AVENUE
KWICK STOP AUSTRALIAN AVE
WEST PALM BEACH, FL 33407 US

New Mailing Address:

5709 AUSTRALIAN AVENUE
KWICK STOP AUSTRALIAN AVE
WEST PALM BEACH, FL 33407 US

FEI Number: 20-5162785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAHMAN, MOHAMMED M
1235 SUFFEX STREET
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

RAHMAN, MOHAMMED M
1235 SUSSEX STREET
BOYNTON BEACH, FL 33436 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: MD M RAHMAN

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAHMAN, MOHAMMED M
Address: 1235 SUFFEX STREET
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: VP () Delete
Name: DEY, MONINDRA C
Address: 1235 SUFFEX STREET
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: SEC () Delete
Name: NOOR, LAILA
Address: 241 NE 199TH LANE
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAHMAN, MOHAMMED M
Address: 1235 SUSSEX STREET
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: VP (X) Change () Addition
Name: DEY, MONINDRA C
Address: 1235 SUSSEX STREET
City-St-Zip: BOYNTON BEACH, FL 33436 US

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

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: MD M RAHMAN

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date