2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000097372

Entity Name: SHOP 2 EARN, INC

FILED Jul 08, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of	Business:
PO BOX 1 MEBANE,	155 NC 27302	3441 S EASTERN AVE LAS VEGAS, NV 89109	
Current N	lailing Address:	New Mailing Address:	
PO BOX 1 MEBANE,	155 NC 27302		
FEI Number	: FEI Number Applied Fo	r () FEI Number Not Applicable (X)	Certificate of Status Desired ()
Name and	Address of Current Registered Ag	ent: Name and Address of N	lew Registered Agent:
	PAT SORSIDE CIRCLE FL 33477 US		
	named entity submits this statement ee of Florida.	for the purpose of changing its registered o	ffice or registered agent, or both,
SIGNATUI	RE:		
	Electronic Signature of Registe	red Agent	Date
	ce with s. 607.193(2)(b), F.S., the corporation	· · · · · · · · · · · · · · · · · · ·	
	S AND DIRECTORS:		TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P () Delete SWINIARSKI, DANIEL J PO BOX 1155 MEBANE, NC 27302	Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	VP () Delete WELSH, PATRICK PO BOX 33131 PALM BEACH GARDENS, FL 33420	Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	S (X) Delete WELSH, ERIN 712 S. LINWOOD BALTIMORE, MD 21224	Title: () Name: Address: City-St-Zip:	Change () Addition

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: DANIEL J SWINIARSKI P 07/08/200	7
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