

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110016

Entity Name: SHEEBA, INC.

FILED
Feb 02, 2007
Secretary of State

Current Principal Place of Business:

3 S PINE ISLAND RD APT 409
PLANTATION, FL 333242653

New Principal Place of Business:

3 S PINE ISLAND RD
SUITE 409
PLANTATION, FL 33324

Current Mailing Address:

3 S PINE ISLAND RD APT 409
PLANTATION, FL 333242653

New Mailing Address:

3 S PINE ISLAND RD
SUITE 409
PLANTATION, FL 33324

FEI Number: 11-3788496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUIS, ANISE J
3 S PINE ISLAND RD APT 409
PLANTATION, FL 333242653 US

Name and Address of New Registered Agent:

JEAN-LOUIS, ANISE
3 S PINE ISLAND RD
SUITE 409
PLANTATION, FL 33324 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: MARC OBAS

02/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOUIS, ANISE J
Address: 3 S PINE ISLAND RD APT 409
City-St-Zip: PLANTATION, FL 333242653

Title: VP () Delete
Name: ALFRED, ANDRE
Address: 3 S PINE ISLAND RD APT 409
City-St-Zip: PLANTATION, FL 333242653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JEAN-LOUIS, ANISE
Address: 3 S PINE ISLAND RD SUITE 409
City-St-Zip: PLANTATION, FL 33324

Title: VP (X) Change () Addition
Name: ALFRED, ANDRE
Address: 3 S PINE ISLAND RD SUITE 409
City-St-Zip: PLANTATION, FL 33324

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: JEAN-LOUIS ANISE

P

02/02/2007

Electronic Signature of Signing Officer or Director

Date