

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155914

Entity Name: SHAYNA'S INSURANCE INC.

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

1418 RENAISSANCE WAY  
BOYNTON BEACH, FL 33426

## New Principal Place of Business:

6864 BRUCE CT  
LAKE WORTH, FL 33463

## Current Mailing Address:

1418 RENAISSANCE WAY  
BOYNTON BEACH, FL 33426

## New Mailing Address:

6864 BRUCE CT  
LAKE WORTH, FL 33463

FEI Number: 20-8075522

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GODEL, SHAYNA B PD  
Address: 1418 RENAISSANCE WAY  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: PD ( ) Delete  
Name: ODDO, SERGIO J PD  
Address: 1418 RENAISSANCE WAY  
City-St-Zip: BOYNTON BEACH, FL 33426

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ODDO, SHAYNA B PD  
Address: 6864 BRUCE CT  
City-St-Zip: LAKE WORTH, FL 33463

Title: PD (X) Change ( ) Addition  
Name: ODDO, SERGIO J PD  
Address: 6864 BRUCE CT  
City-St-Zip: LAKE WORTH, FL 33463

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: SHAYNA BETH ODDO

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date