

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000006403

Entity Name: SHELL DESIGN STUDIOS, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

215 N COCONUT LANE
MIAMI, FL 33139

New Principal Place of Business:

2094 CHAGALL CIRCLE
WEST PALM BEACH, FL 33409

Current Mailing Address:

3070 CAMINITO AVENUE
YUBA CITY, CA 95991

New Mailing Address:

2094 CHAGALL CIRCLE
WEST PALM BEACH, FL 33409

FEI Number: 65-0370662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHENKER, HAROLD
215 N COCONUT LANE
MIAMI BEACH, FL 33139 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: DP () Delete
Name: SCHENKER, SHELLEY
Address: 3070 CAMINITO AVENUE
City-St-Zip: YUBA CITY, CA 95991

Title: DVPS () Delete
Name: SCHENKER, HAROLD
Address: 215 N COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCHENKER, SHELLEY
Address: 2094 CHAGALL CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DVPS (X) Change () Addition
Name: SCHENKER, HAROLD G
Address: 215 N COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HAROLD G. SCHENKER

DVPS

01/05/2005

Electronic Signature of Signing Officer or Director

Date