


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 8:00 am
Secretary of State


04-16-2007 90065 028 ***150.00

DOCUMENT # P93000002489 1. Entity Name SHAYCO CORPORATION	
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Principal Place of Business 100 WALLACE AVENUE, STE 100 SARASOTA, FL 34237	Mailing Address P.O. BOX 18419 SARASOTA, FL 34276
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DO NOT WRITE IN THIS SPACE

4006200



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0390681	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BONE, DAVID D
100 WALLACE AVENUE, STE 100
SARASOTA, FL 34237**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHAYGAN, REZA 85 SKYMARK DRIVE, #2203 TORONTO ONTARIO CANADA, M2H5P2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAYGAN, MOHAMMAD 85 SKYMARK DRIVE, #2203 TORONTO ONTARIO CANADA, M2H5P2
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **4/13/07** **941-922-4600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #