

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000018614

1. Entity Name

SHOREWOOD HOLDING CORP.



Principal Place of Business

625 N FLAGLER DR SUITE 625
WEST PALM BEACH, FL 33401 US

Mailing Address

625 N FLAGLER DR SUITE 625
WEST PALM BEACH, FL 33401 US



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3121438

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERNSTEIN, MICHAEL
625 NORTH FLAGLER DRIVE
SUITE 625
WEST PALM BEACH, FL 33401

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when terminating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BERNSTEIN, MICHAEL
STREET ADDRESS	625 N FLAGLER DR SUITE 625
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	DEVP
NAME	SHAPIRO, STEPHEN J
STREET ADDRESS	625 N FLAGLER DR SUITE 625
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	EVST
NAME	SESCO, CAROLYN S
STREET ADDRESS	625 N FLAGLER DR SUITE 625
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/08/06-80027-004 150.00

**DO NOT WRITE
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:

Michael Bernstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Bernstein 01/12/2006 (561) 352-2280

Date

Daytime Phone #