2005 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P95000058794 1. Entity Name SHARON GALLERIES, INC.		FILED Apr 18, 2005 08:00 AM Secretary of State	
DO NOT WRITE IN THIS SPACE		01312005         No Chg-P         CR2E034 (10/03)           4. FEI Number         Applied For           65-0603066         Not Applicable           5. Certificate of Status Desired         \$8.75 Additional           Fee Required         Fee Required	
6. Name and Address of Current Registered	/d Agent		
JENNY, CAROL 5970 SW 18TH ST, #242 BOCA RATON, FL 33433		DO NOT WRITE IN THIS SPACE	
<ul> <li>Signature, typed or printed name of registered agent and title if apent</li> <li>Signature, typed or printed name of registered agent and title if apent</li> <li>File NOW!!! FEE 18 \$150.00</li> <li>After May 1, 2005 Fee will be \$550.00</li> </ul>	ifcable (NOTE, Registered Agent signature requined for the signature of th		of Florida. I am familiar with, and accept
10. OFFICERS AND DIRECTOF ITTLE PSTD NAME JENNY, CAROL STREET ADDRESS 5970 SW 18TH ST GITY-ST-ZIP BOCA RATON, FL ITTLE NAME STREET ADDRESS GITY-ST-ZIP	RS	<u>04</u> /18	0000313683 /05-80133-018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u>-</u> -	•
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filling of indicated on this report or supplemental report is true and a of the corporation of the receiver or trustee empowered to e changed, or on an attachment with an address, with all other SIGNATURE:	execute this report as required by Chapter 6 er like empowered. $Ares \cdot C \cdot Jerrn N$	Section 119.07(3)(I), Florida Stat. e same legal effect as if made ur 07, Florida Statutes, and that/my Pate	utes. I further certify that the information nder oath; that I am an officer or director name appears in Block 10 or Block 11 if 56/25/6/01 Daytime Phone P