

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087115

Entity Name: SHEKEL BUSINESS, INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

18671 COLLINS AVENUE
#702
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

18671 COLLINS AVENUE
#702
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

18671 COLLINS AVENUE
NO. 702
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

100 SOUTH POINTE DRIVE
NO. 3305
MIAMI BEACH, FL 33139

FEI Number: 65-0677994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, LAURENCE I ESQ
2255 GLADES ROAD
ONE BOCA PLACE - SUITE 411E
BOCA RATON, FL 33431 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: COHEN, DAVID
Address: 18671 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SVD () Delete
Name: COHEN, RIVKA
Address: 18671 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID COHEN

PD

01/09/2007

Electronic Signature of Signing Officer or Director

Date