

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 26, 2007 08:00 A
Secretary of State

DOCUMENT # P98000039646

1. Entity Name
S.H.M., INC.



Principal Place of Business
20350 HIGHLAND LAKE BLVD
MIAMI BCH, FL 33179

Mailing Address
20350 HIGHLAND LAKE BLVD
MIAMI, FL 33179

(P98000039646P)

03212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0848623

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LAUFER, FAIGY
20350 HIGHLAND LAKE BLVD
MIAMI, FL 33179

**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

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

(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. ☐

\$5.00 May Be
Added to Fees

U00000733252
05/09/07-80078-022 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME LAUFER, MENDEL
STREET ADDRESS 20350 HIGHLAND LAKES BLVD
CITY-ST-ZIP MIAMI, FL 33179

TITLE D
NAME LAUFER, FAIGY FERNA
STREET ADDRESS 20350 HIGHLAND LKS BLVD.
CITY-ST-ZIP NMB, FL 33179

TITLE P
NAME LAUFER, MENDEL
STREET ADDRESS 20350 HIGHLAND LKS BLVD.
CITY-ST-ZIP NMB, FL 33179

TITLE VP
NAME LAUFER, FAIGY
STREET ADDRESS 20350 HIGHLAND LKS BLVD.
CITY-ST-ZIP NMB, FL 33179

TITLE S
NAME LAUFER, FAIGY
STREET ADDRESS 20350 HIGHLAND LKS BLVD.
CITY-ST-ZIP NMB, FL 33179

TITLE T
NAME LAUFER, FAIGY
STREET ADDRESS 20350 HIGHLAND LKS BLVD.
CITY-ST-ZIP NMB, FL 33179

**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:

Kerna Faigy Lauder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07

305-685-6220
Date Daytime Phone #