


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90181 045 ***150.00

DOCUMENT # V15030 1. Entity Name SHIMBERAL, INC.					
Principal Place of Business 514 41ST STREET MIAMI BEACH, FL 33140			Mailing Address 514 41ST STREET MIAMI BEACH, FL 33140		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0323782	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BIRNBAUM, MARC 11077 BISCAYNE BLVD. SUITE 301 MIAMI, FL 33161			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HAROLD, KAREN		NAME	Harrold, Karen (spelling correction)	
STREET ADDRESS	920 W 43 CRT		STREET ADDRESS	Same	
CITY- ST- ZIP	MIAMI BCH. FL 33140		CITY- ST- ZIP	Same	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARROLD, BIIS		NAME		
STREET ADDRESS	920 W 43 COURT		STREET ADDRESS		
CITY- ST- ZIP	MIAMI BEACH, FL 33140		CITY- ST- ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARROLD, TAMBY		NAME	Harrold, Tamby	
STREET ADDRESS	820 W 43 COURT		STREET ADDRESS	920 W 43 COURT (address correction)	
CITY- ST- ZIP	MIAMI BEACH, FL 33140		CITY- ST- ZIP	MIAMI BEACH, FL 33140	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Karen Harrold</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>March 3, 2005</u> <u>305-538223</u> <small>Date Daytime Phone</small>		

50023555



01112005 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

FL Zip Code

\$5.00 May Be Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

Harrold, Karen (spelling correction)

☐ Change ☐ Addition

Harrold, Biis

☐ Change ☐ Addition

Harrold, Tamby

☐ Change ☐ Addition

920 W 43 COURT (address correction)

☐ Change ☐ Addition

MIAMI BEACH, FL 33140

☐ Change ☐ Addition

MIAMI BEACH, FL 33140

☐ Change ☐ Addition

MIAMI BEACH, FL 33140

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MIAMI BEACH, FL 33140

☐ Change ☐ Addition