

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 223993

FILED
Apr 13, 2009
Secretary of State

Entity Name: SHANGRI-LA HOUSE, INC

Current Principal Place of Business:

428 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

428 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-6071210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LJ SERVICES GROUP
1045 KANE CONCOURSE
SUITE #212
BAY HARBOR ISLANDS, FL 33154 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: P () Delete
Name: SOBEL, JENNIFER L
Address: 428 COLLINS AVE #8
City-St-Zip: MIAMI BEACH, FL 33139

Title: V () Delete
Name: ROGOFF, DEBRORAH
Address: 428 COLLINS AVE. #6
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST () Delete
Name: PLEBAN, RICHARD
Address: 428 COLLINS AVE #04
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: AMARO, GILBERT
Address: 428 COLLINS AVE #1
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: CZUCHNICKI, MIKE
Address: 428 COLLINS AVE #15
City-St-Zip: MIAMI BEACH, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOBEL, JENNIFER L
Address: 428 COLLINS AVE #8
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD (X) Change () Addition
Name: ROGOFF, DEBRORAH
Address: 428 COLLINS AVE. #6
City-St-Zip: MIAMI BEACH, FL 33139

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

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 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: LINDA JOHNSON

MGR

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date