


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # K73704
 1. Entity Name
PAGE'S PASTIQUES, INC.



Principal Place of Business
**741 TILDENVILLE SCHOOL RD.
 WINTER GARDEN, FL 34787**

Mailing Address
**741 TILDENVILLE SCHOOL RD.
 WINTER GARDEN, FL 34787**



DO NOT WRITE IN THIS SPACE

02212005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2939824 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PAGE, JENNIFER F.
 741 TILDENVILLE SCHOOL ROAD
 WINTER GARDENS, FL 34787**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PAGE, JENNIFER 741 TILDENVILLE SCHOOL WINTER GARDEN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BERGMEIER, JUDY 741 TILDENVILLE SCHOOL WINTER GARDEN, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Judy Bergmeier Judy Bergmeier 2-21-2005 407-877-3845
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #