

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L94701

Entity Name: SOCK IT TO ME, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

2851 CYPRESS CREEK ROAD
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2851 CYPRESS CREEK ROAD
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0224617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESS, DAVID
2851 CYPRESS CREEK ROAD
FT LAUDERDALE, FL 33309 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: D () Delete
Name: CAPPADONA, CAROL
Address: 2851 CYPRESS CREEK RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D () Delete
Name: CAPPADONA, GINA
Address: 2851 CYPRESS CREEK ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: CABRERA, GINA
Address: 2851 CYPRESS CREEK ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GINA CABRERA

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date