

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046855

Entity Name: COLOR MY HEART, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

134 OCEAN WLAK DR S.
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

3653 PARK POINTE DR
LEXINGTON, KY 40509

New Mailing Address:

FEI Number: 59-3647825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKOUL, RICK CPA
134 OCEAN WALK DR SOUTH
ATLANTIC BEACH, FL 32233 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: HOSEUS, MICHAEL S
Address: 3653 PARK POINTE DR.
City-St-Zip: LEXINGTON, KY 40509

Title: P () Delete
Name: HOSEUS, L. SUZANNE
Address: 3653 PARK POINTE DR.
City-St-Zip: LEXINGTON, KY 40509

Title: D () Delete
Name: MACKOUL, RICK
Address: 134 OCEAN WLAK DR S.
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOSEUS, MICHAEL S TREASUR
Address: 3653 PARK POINTE DR.
City-St-Zip: LEXINGTON, KY 40509

Title: P (X) Change () Addition
Name: HOSEUS, L. SUZANNE PRES
Address: 3653 PARK POINTE DR.
City-St-Zip: LEXINGTON, KY 40509

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: L SUZANNE HOSEUS

PRES

04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date