

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006968

FILED  
Jun 25, 2004  
Secretary of State

Entity Name: SECRET SENSATIONS, INC.

**Current Principal Place of Business:**

2090 S NOVA RD.  
SUITE B217  
SO. DAYTONA, FL 32119

**New Principal Place of Business:**

**Current Mailing Address:**

2090 S NOVA RD.  
SUITE B217  
SO. DAYTONA, FL 32119

**New Mailing Address:**

FEI Number: 59-4390266      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BAILEY, ASHLEY L  
103B CARDINAL DR.  
ORMOND BEACH, FL 32176

**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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BAILEY, ASHLEY J  
Address: 103 B CANDINIH DR.  
City-St-Zip: ORMOND BEACH, FL 32176

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BAILEY, ASHLEY J  
Address: 103 B CARDINAL DR.  
City-St-Zip: ORMOND BEACH, FL 32176

Title: V-P ( ) Change (X) Addition  
Name: BAILEY, SHARON  
Address: 83 B CARDINAL DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

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: SHARON BAILEY

V-P

06/25/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date