

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025134

Entity Name: SHOWME ENTERPRISES, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

PO BOX 1436
ANTHONY, FL 326171436

New Principal Place of Business:

2631 N.E. 49TH. COURT
OCALA, FL 34470

Current Mailing Address:

PO BOX 1436
ANTHONY, FL 326171436

New Mailing Address:

2631 N.E. 49TH. COURT
OCALA, FL 34470

FEI Number: 20-0699356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, CORTNEY G
2631 NNE 49TH COURT
OCALA, FL 34470 US

Name and Address of New Registered Agent:

EVANS, CORTNEY G
2631 N.E. 49TH. COURT
OCALA, FL 34470 US

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: CORTNEY G. EVANS

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: EVANS, CORTNEY G
Address: 4 CEDAR CT
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: EVANS, CORTNEY G
Address: 2631 N.E. 49TH. COURT
City-St-Zip: OCALA, FL 34470

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: CORTNEY G. EVANS

PSTD

04/29/2005

Electronic Signature of Signing Officer or Director

Date