

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123708

Entity Name: DARK LAKE GRAPHICS, INC.

FILED
Feb 24, 2005
Secretary of State

Current Principal Place of Business:

2012 12TH ST. N.
SUITE. 1
ST. PETERSBURG, FL 33704 US

Current Mailing Address:

2012 12TH ST. N.
SUITE. 1
ST. PETERSBURG, FL 33704 US

FEI Number: 06-1731829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, TEENA M PRES.
2012 12TH ST. N.
SUITE 1
ST. PETERSBURG, FL 33704 US

New Principal Place of Business:

2012 12TH ST. N.
SUITE 1
ST. PETERSBURG, FL 33704 US

New Mailing Address:

2012 12TH ST. N.
SUITE 1
ST. PETERSBURG, FL 33704 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: PRES () Delete
Name: CHAPMAN, TEENA M OWNER
Address: 2012 12TH ST. N. SUITE. 1
City-St-Zip: ST. PETERSBURG, FL 33704 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CHAPMAN, TEENA M OWNER
Address: 2012 12TH ST. N. SUITE 1
City-St-Zip: ST. PETERSBURG, FL 33704 US

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: TEENA CHAPMAN

PRES

02/24/2005

Electronic Signature of Signing Officer or Director

Date