

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000109181

**Entity Name:** DREAMSCAPES INTERNATIONAL PROPERTIES, INC.

**Current Principal Place of Business:**

2295 NW CORPORATE BLVD  
SUITE 131  
BOCA RATON, FL 33431

**FILED**  
**Apr 26, 2014**  
**Secretary of State**  
**CC9483465828**

**Current Mailing Address:**

2300 NW CORPORATE BLVD  
111  
BOCA RATON, FL 33431 US

**FEI Number: 45-4588090**

**Certificate of Status Desired: No**

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

DOUGHERTY, THOMAS H  
712 U.S. HWY ONE  
210  
NORTH PALM BEACH, FL 33408 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            CEO, CFO, DIRECTOR  
Name            KING, COLM  
Address        2295 NW CORPORATE BLVD  
                 SUITE 131  
City-State-Zip: BOCA RATON FL 33431

Title            DIRECTOR  
Name            DOUGHERTY, THOMAS  
Address        712 US HWY 1  
                 STE. 210  
City-State-Zip: NORTH PALM BEACH FL 33408

Title            DIRECTOR  
Name            CARLSON, SCOTT  
Address        12 BUMKER RD  
City-State-Zip: ELDON MO 65026

*I hereby 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 all other like empowered.*

**SIGNATURE: COLM KING**

**CEO**

**04/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date