2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 336202

Entity Name: SHARP IMPRESSIONS INCORPORATED

Current Principal Place of Business:

4400 NW 19TH AVE
A
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

4400 NW 19TH AVE
A
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1270242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUTES, KATHRYN
4400 NW 19 AVE
SUITE A
POMPANO BEACH, FL 33064 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LUTES,MARVIN A,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: V ( ) Delete
Name: LUTES, BANELL B.,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: S ( ) Delete
Name: LUTES, KATHRYN M.,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: T ( ) Delete
Name: HARRIS, KAREN,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LUTES, BANELL B..,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: V (X) Change ( ) Addition
Name: LUTES, KATHRYN,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Change ( ) Addition
Name: HARRIS, KAREN,
Address: 4400-A NW 19TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHRYN LUTES VP 05/01/2006

Electronic Signature of Signing Officer or Director — Date