2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005
Secretary of State

DOCUMENT# 543964

Entity Name: FIRST IMPRESSIONS PRINTING INC.

Current Principal Place of Business:

1847 S.W. 27 AVE.
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

2471 SW 37 ST.
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 59-1804174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OPITZ, CHARLES
2471 SW 37 ST.
OCALA, FL 34474 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: VTD ( ) Delete
Name: OPITZ, CHARLES,
Address: 2471 S.W. 37TH STREET
City-St-Zip: OCALA, FL

Title: PSD ( ) Delete
Name: OPITZ, KAREN,
Address: 2471 S.W. 37TH STREET
City-St-Zip: OCALA, FL

Title: VP ( ) Delete
Name: OPITZ, MICHAEL
Address: 3636 SE 47 ST
City-St-Zip: OCALA, FL 34471

Title: VP ( ) Delete
Name: OPITZ, DANIEL
Address: 4626 SE 35 AVE
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: CHARLES J. OPITZ VP 01/21/2005
Electronic Signature of Signing Officer or Director Date