2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State
04-18-2005 90575 005 ***150.00

DOCUMENT # 559250

1. Entity Name
COLLECTABLE IMAGES, INC.

Principal Place of Business	Mailing Address
3836 SUNFLOWER COURT MERRITT ISLAND, FL 32953	3836 SUNFLOWER COURT MERRITT ISLAND, FL 32953

03112005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
2158 Auburn Lakes Drive Suite, Apt. #, etc.	2158 Auburn Lakes Drive Suite, Apt. #, etc.
Viera, FL City & State	Viera, FL City & State
Zip: 32955-6764 Country: USA	Zip: 32955-6764 Country: USA

4. FEI Number: 59-1812875 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PANZAK, HALI 3836 SUNFLOWER COURT MERRITT ISLAND, FL 32953	Name: Lois Felder Street Address (P.O. Box Number is Not Acceptable): 2158 Auburn Lakes Drive City: Viera FL Zip Code: 32955-6764

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lois Felder Lois Felder, President 4-16-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVD FELDER, LOIS G. PO BOX 11118 COCOA, FL 32923	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 2158 Auburn Lakes Drive Viera, FL 32955-6764
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST PANZAK, HALI 3836 SUNFLOWER COURT MERRITT ISLAND, FL 32953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD EPSTEIN, DIANA 110 DE SOTO PKWY, APT 17 SATELLITE BEACH, FL 32937	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lois Felder President 4-16-05 (321) 633-1616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Lois Felder, President