


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000002296 1. Entity Name NAMETAG CENTRAL, INC.	
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Principal Place of Business 3873 AIRPORT WAY #9754 BELLINGHAM, WA 98227-9754	Mailing Address 3873 AIRPORT WAY #9754 BELLINGHAM, WA 98227-9754
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DO NOT WRITE IN THIS SPACE



07192005 No Chg-P CR2E034 (10/03)

4. FEI Number 76-0732993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP KOTT, MARLA 8687 YUKON STREET VANCOUVER B.C., V5X4V1
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV FLANDERS, ELLEN 8687 YUKON STREET VANCOUVER B.C., V5X4V1
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MACMILLAN, KRISTIN 8687 YUKON STREET VANCOUVER B.C., V5X4V1
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U00000374476
07/26/05-80002-001 550.00

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: Kristin Macmillan July 24, 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #