2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G11607

Entity Name: MODELS EXCHANGE, INC.

3400 GALT OCEAN DR #1603

FT LAUDERDALE, FL

Address: City-St-Zip: FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2425 E. COMMERCIAL BLVD 2929 E. COMMERCIAL BLVD SUITE 206 PENTHOUSE AA FT.LAUDERDALE, FL 33308 FT.LAUDERDALE, FL 33308 New Mailing Address: **Current Mailing Address:** 2425 E. COMMERCIAL BLVD 2929 E. COMMERCIAL BLVD SUITE 206 PENTHOUSE AA FT.LAUDERDALE, FL 33308 FT.LAUDERDALE, FL 33308 FEI Number: 59-2238153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOFFMAN, STEVEN 3840 NE 26TH AVE LIGHTHOUSE PT, FL 33064 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOFFMAN, STEVEN P, Name: Name: 3840 NE 26TH AVE Address: Address: City-St-Zip: LIGHTHOUSE PT, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: HOFFMAN, HARVEY DR. Name: 1550 SAN JUAN HILLS DRIVE Address: Address: LAS VEGA, NV City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HOFFMAN, SAMUEL, Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: STEVEN HOFFMAN PRES 04/25/2005