FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90033 030 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K03801

1. EntityName
THE LOGO SHOP, INC.

PrincipalPlaceofBusiness	MailingAddress
1301 GAUTT AVE SARASOTA, FL 34232 US	PO BOX 7878 SARASOTA, FL 34278 US

01192004 Chg-P CR2E034(10/03)

2. PrincipalPlaceofBusiness	3. MailingAddress
1301 GANTT AVE	
Suite,Apt.#,etc.	Suite,Apt.#,etc.
City&State: SARASOTA, FL	City&State
Zip: 34232 Country: US	Zip Country

4. FEINumber 65-0020122 ☐ AppliedFor ☐ NotApplicable

5. CertificateofStatusDesired ☐ $8.75 Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

MALONEY, TERRY MARTIN
5210 BOX TURTLE CIRCLE
SARASOTA, FL 34232

7. NameandAddressofNewRegisteredAgent

Name
StreetAddress (P.O.BoxNumbersisNotAcceptable)
City FL ZipCode

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,i ntheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE ____________________
Signature,typedorprintednameofregisteredagentandtitleifapplicable. (NOTE:RegisteredAgentsignaturerequiredwhenre instating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. ElectionCampaignFinancing TrustFundContribution. ☐ **$5.00** MayBe AddedtoFees

10. OFFICERSANDDIRECTORS			11. ADDITIONS/CHANGESTOOFFICERSANDDIRECTORSIN11	
TITLE NAME STREETADDRESS CITY-ST-ZIP	PT MALONEY, TERRY MARTIN 5210 BOX TURTLE CR SARASOTA, FL	☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREETADDRESS CITY-ST-ZIP	V MALONEY, JAMES 5210 BOX TURTLE CR SARASOTA, FL	☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREETADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREETADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREETADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREETADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREETADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. Iherebycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedinsection119.07(3)(i),FloridaStatutes.Ifurthercertifythattheinformation indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath;thatIamanofficerordirector ofthecorporationorthereceiverortrusteeempoweredtoexecutethisreportasrequiredbyChapter607,FloridaStatutes;an dthatmynameappearsinBlock 10orBlock 11if changed,oronanattachmentwith anaddress,withallotherlikeempowered.

SIGNATURE: Terry Martin Maloney 1/25/04 941-371-9797
SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#