

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96858

FILED
Jan 29, 2005
Secretary of State

Entity Name: UNFORGETTABLE IMAGEZ, INC.

Current Principal Place of Business:

1740 SEMORAN BLVD.
UNIT 112
WINTER PARK, FL 32792 US

Current Mailing Address:

1740 SEMORAN BLVD.
UNIT 112
WINTER PARK, FL 32792 US

New Principal Place of Business:

1740 STATE ROAD 436
UNIT 112
WINTER PARK, FL 32792 US

New Mailing Address:

1740 STATE ROAD 436
UNIT 112
WINTER PARK, FL 32792 US

FEI Number: 59-2952388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, ALANA L.
1740 SEMORAN BLVD.
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

KELLY, ALANA L.
1740 STATE ROAD 436
UNIT # 112
WINTER PARK, FL 32792 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:

01/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KELLY, ALANA L.,
Address: 1740 SEMORAN BLVD.
City-St-Zip: WINTER PARK, FL

Title: VSD () Delete
Name: MARTIN, GARY J.,
Address: 1740 SEMORAN BLVD.
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KELLY, ALANA L.,
Address: 1740 STATE ROAD 436
City-St-Zip: WINTER PARK, FL 32792

Title: VSD (X) Change () Addition
Name: MARTIN, GARY J.,
Address: 1740 STATE ROAD 436
City-St-Zip: WINTER PARK, FL 32792

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: GARY J. MARTIN

VSD

01/29/2005

Electronic Signature of Signing Officer or Director

Date