

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M99581

FILED  
Mar 08, 2005  
Secretary of State

Entity Name: INFINITE IMAGINATION, INC.

## Current Principal Place of Business:

9020 SW 140 ST.  
MIAMI, FL 33176 US

## New Principal Place of Business:

## Current Mailing Address:

9020 SW 140TH ST.  
MIAMI, FL 33176 US

## New Mailing Address:

FEI Number: 65-0072702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROBINSKY, BRENT  
633 N KROMA AVE  
HOMESTEAD, FL 33030 US

## Name and Address of New Registered Agent:

PROBINSKY, BRENT  
633 N KROME AVE  
HOMESTEAD, FL 33030 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:

03/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: SLOAN, BARBARA,  
Address: 9020 SW 140TH ST.  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: SLOAN, BARBARA,  
Address: 9020 SW 140TH ST.  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: SLOAN, BARBARA,  
Address: 9020 SW 140TH ST.  
City-St-Zip: MIAMI, FL 33176 US

Title: T (X) Change ( ) Addition  
Name: SLOAN, BARBARA,  
Address: 9020 SW 140TH ST.  
City-St-Zip: MIAMI, FL 33176 US

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: BARBARA SLOAN

DPS

03/08/2005

Electronic Signature of Signing Officer or Director

Date