## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000001104

Entity Name: POSITIVE IMAGES ENTERPRISES, INC.

FILED May 26, 2005 Secretary of State

| Current Principal Place of Business:   |                 |                                      | New Principal Place of Business:  |   |  |
|--|-----------------|--------------------------------------|---|---|--|
| 2700 W. OA<br>FORT LAUI  |                 | ARK BLVD., STE. 21<br>, FL 33311     |   |   |  |
| Current Ma   | ailing Add      | ress:                                | New Mailing Address:  |   |  |
| 2700 W. OA<br>FORT LAUI  |                 | ARK BLVD., STE. 21<br>, FL 33311     |   |   |  |
| FEI Number: 65-0750172 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent: |                 |                                      |   |   |  |
|  |                 | • •                                  |   |   |  |
| KENDRICK, PATRICIA<br>2700 W. OAKLAND PARK BLVD., STE. 21<br>FORT LAUDERDALE, FL 33311 US  |                 |                                      | ELLIS, CORNELL<br>2700 W. OAKLAND PARK BLVD., STE. 21<br>FORT LAUDERDALE, FL 33311 US |   |  |
| The above in the State   |                 |                                      | of changing i   | ts registered office or registered agent, or both,  |  |
| SIGNATURE: CORNELL ELLIS   |                 |                                      |   | 05/26/2005  |  |
|  |                 | tronic Signature of Registered Agent |   | Date  |  |
| OFFICERS AND DIRECTORS: AD   |                 |                                      |   | IS/CHANGES TO OFFICERS AND DIRECTORS:               |  |
|  |                 |                                      |   |   |  |
| Title:   | P<br>BATCHIE, J | ( ) Delete                           | Title:<br>Name:   | ()Change ()Addition                                 |  |
| Name:<br>Address:  |                 | TON CIRCLE                           | Address:  |   |  |
| City-St-Zip:   | FORT LAUE       | DERDALE, FL 33312                    | City-St-Zip:  |   |  |
| Title:   | VP              | ( ) Delete                           | Title:  | VP (X) Change ( ) Addition                          |  |
| Name:  |                 | RUBYE NELL                           | Name:   | SIMONSON, JUDITH                                    |  |
| Address:   |                 | TH STREET, #207                      | Address:  | 2912 WASHINGTON STREET                              |  |
| City-St-Zip:   | N MIAMI BE      | EACH, FL 33170                       | City-St-Zip:  | HOLLYWOOD, FL 333020                                |  |
| Title:   | Т               | ( ) Delete                           | Title:  | ( ) Change ( ) Addition                             |  |
| Name:  | CAREY, RO       |                                      | Name:   |   |  |
| Address:<br>City-St-Zip:   |                 | ID TERRACE<br>BEACH, FL 33060        | Address:<br>City-St-Zip:  |   |  |
| Title:   | s               | ( ) Delete                           | Title:  | S (X) Change ( ) Addition                           |  |
| Name:  | KELLEY, TE      |                                      | Name:   | BRIMM, WILBERT                                      |  |
| Address:   |                 | 8TH STREET<br>OD, FL 33023           | Address:<br>City-St-Zip:  | 2850 NW 44TH STREET, #409<br>OAKLAND PARK, FL 33309 |  |
| City-St-Zip:   | TIOLLTVVO       | 00,10 00020                          | Oity-Ot-Zip.  | OAKLAND LAKK, LE 33308                              |  |
| Title:   | D               | ( ) Delete                           | Title:  | D (X) Change ( ) Addition                           |  |
| Name:<br>Address:  | STEVENS,        | CARYL<br>ND STREET                   | Name:<br>Address:   | OATES, LAURA<br>P.O. BOX 451014                     |  |
| City-St-Zip:   | MIAMI, FL       |                                      | Address:<br>City-St-Zip:  | SUNRISE, FL 33345                                   |  |
| Title:   | D               | (X) Delete                           | Title:  | ( ) Change ( ) Addition                             |  |

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JEAN DADE BATCHIE P 05/26/2005

SIMONSON, JUDITH

2915 WASHINGTON STREET

HOLLYWOOD, FL 33020

Name:

Address:

City-St-Zip: