

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001104

FILED
Feb 19, 2010
Secretary of State

Entity Name: POSITIVE IMAGES ENTERPRISES, INC.

Current Principal Place of Business:

2700 W. OAKLAND PARK BLVD.,
SUITE 21
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

2700 W. OAKLAND PARK BLVD.,
SUITE 21
FORT LAUDERDALE, FL 33311 US

New Mailing Address:

FEI Number: 65-0750172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, JACQUELINE
2700 W. OAKLAND PARK BLVD.,
SUITE 21
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

ALLMAN, ANDREA
2700 W. OAKLAND PARK BLVD.,
SUITE 21
FORT LAUDERDALE, FL 33311 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: ANDREA ALLLMAN

02/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V P
Name: SIMONSON, JUDITH A MSW
Address: 2912 WASHINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: T
Name: SHARON, HALLBACK
Address: P.O.BOX 695204
City-St-Zip: MIAMI, FL 33269 US

Title: P
Name: BRYAN, FAVORS
Address: 387 NW 107 AVE
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: S
Name: ANDREA, ALLMAN
Address: 2331 NW 33RD ST APT 308
City-St-Zip: OAKLAND PARK, FL 33309 US

Title: M
Name: VALERIE, PELLEGRINI PHD
Address: 5361 SW 57 SRTEET
City-St-Zip: DAVIE, FL 33314 US

I hereby 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 all other like empowered.

SIGNATURE: GEORGIA FOSTER

E D

02/19/2010

Electronic Signature of Signing Officer or Director

Date