

2010 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT											
DOCUMENT # P00000087600							13 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A	")			
1. Entity Name							1				
INSPIRATIONAL MOMENTS, INC.							10 MAY 17 PM 4:51				
					9011	ָ י טו					
Principal Place of Business Mailing Address						514	MARSHE	atadi. Malaota			
6731 TULIPA			6731 TULIPAN FT PIERCE, FL 34951			TALL	AHAMBI E				
FT PIERCE, FL 34951 FT PIERCE, FL 34951											
Principal Place of Business - No P O, Box # 3. Mailing Address											
2. Fillicipal F	riace or busin	less - 140 F C. DOX #	3. Mailing Address	Mailing Address				i Pătel Pelit lebie	ATIII BUSTI UU		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			05062010	Chg-P	CR2E034	(11/08)		
City & State			City & State			4. FEI Numb 65-104			_ 	phed For at Applicable	
Zip	Zip Country		Zip Coun		itry	5 Certificate of Status Desired 7 \$8.75 A		3.75 Add	itional		
6. Name and Address of Current		Registered Agent		Ţ"	7. Name and	7. Name and Address of New Registered Agent			-		
Name								•			
RIMMER, ROY W JR 6731 TULIPAN FT PIERCE, FL 34951			•		Street Address (P.O. Box Number is Not Acceptable)						
TTTLKO	L, IL 343	51									
				City	City FL Zıp Code						
			or the purpose of changing its	s register	l ed office or register	red agent, or bo	th, in the State of Fid	orida. I am fan	iliar with.	and accept	
the obligations of registered agent											
SIGNATURE	Sanatura amort	or printed name of registered agent	and Ide depolecable (NO)	I Boostus	d Agent signature required	t when reinstaling)		DATE			
	Signature, typeo	or printed realise or registered agent	Seria (100) Sphiresana (100)	E Nogralare	a rigorii signistare requirec			J2			
FILE NOW!!! FEE IS \$150.00 Due by September 24, 2010 9. Election Campaign Financing \$5. Trust Fund Contribution. Add							In accordance v corporation did	vith s. 607.19 not receive t	93(2)(b), he prior r	F.S., the notice.	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF	ICERS AND D	RECTOR	S IN 11	
TITLE	D Delete To				F				Change	Addition	
NAME		ROY W JR		NAME							
STREET ADDRESS CITY-ST-ZIP	6731 TUL	1PAN :E. FL 34951			ET ADDRESS ST-ZIP						
TITLE	1111110		☐ Delete	TITU					Change	Addition	
NAME				NAM	I				•	_	
STREET ADDRESS	İ				FET ADDRESS - ST - ZIP						
CITY - ST - ZIP TITLE			☐ Delete	TITL					Change.	Addition	
NAME			Delete	NAM	4	•					
STREET ADDRESS					ET ADDRESS -ST-ZIP						
CITY-ST-ZIP		J. 14 14 14 14 14 14 14 14 14 14 14 14 14	Delete	CITY					Change	Addition	
TITLE !	1		LL Delete	NAM				<u> </u>	_ onlings		
STREET ADDRESS					ET ADDRESS						
CITY-ST ZIP				_	- ST- ZIP				7.01		
TITLE NAME			☐ Delete	TITL	I	. , A	ooteo	4724	Change	Addition	
STREET ADDRESS					ET ADDRESS	057	00180 6/10-0101	1010	**15	50.00	
CITY-ST-ZIP				CITY	-ST-ZIP						
TITLE			☐ Delete	TITL					Change	Addition	
NAME STREET ADDRESS				NAM STRE	ET ADDRESS						
CITY-ST-ZIP					- ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if											
changed, or on an attachment with an address with all other like empowered.											
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Description Printed Name of Signing Officer or Director											

C1,762