2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099217

Entity Name: NICOLE MICHELLE MATERNITY, INC.

FILED Jul 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

428 INDIAN ROCKS RD. 2336 MESSENGER CIRCLE LARGO, FL 33770 SAFETY HARBOR, FL 34695

Current Mailing Address: New Mailing Address:

428 INDIAN ROCKS ROAD 2336 MESSENGER CIRCLE LARGO, FL 33770 SAFETY HARBOR, FL 34695

FEI Number: 59-3409217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAULTON, NICOLE

14180 VALENTINE TRAIL

LARGO, FL 33774 US

DAULTON, NICOLE

2336 MESSENGER CIRCLE

SAFETY HARBOR, FL 34695 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: 07/27/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 DAULTON, NICOLE
 Name:
 DAULTON, NICOLE

 Address:
 14180 VALENTINE TRAIL
 Address:
 2336 MESSENGER CIRCLE

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 SAFETY HARBOR, FL 34695

Title: DVT () Delete Title: () Change () Addition

 Name:
 GARCIA, FREDDIE JR
 Name:

 Address:
 643 WOODBRIDGE DR
 Address:

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:

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: NICOLE M DAULTON PD 07/27/2005