2005 FOR PROFIT CORPORATION SEP 0 1 2015 ANNUAL REPORT

DOCUMENT # P00000115283 1. Entity Name IDDREAMS, INC.										MY 9: 09)
Principal Place of Business 1325 RIDGE STREET NAPLES, FL 34103			Mailing Address 1325 RIDGE STREET NAPLES, FL 34103				SECNETALSSEE, FLORIDA				
2. Principal Place of Business 3				J. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				08112005	Chg-P	CR2	E034 (10/03)	
City & State			City & State						w	_ 	oplied For
Country		Zip Count		itry				\$9.75 Additional			
6. Name	and Address of Currer	nt Regis	stered Agent				7. Name and	Address of New	Registere	d Agent	
GORGA, MICHELLE											
1325 RIDGE ST. NAPLES, FL 34103					Street Address (P.O. Box Number is Not Acceptable)						
								· .			
					City				F	L Zip Cod	e
		for the p	ourpose of changing its	register	ed office or re	gistere	ed agent, or bo	th, in the State of	Florida. Lai	m familiar with,	and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. [NOTE: Registered Agent signature required when reinstating] DATE											
						\$5.0 Adde	00 May Be ed to Fees				
							ADDITIONS	CHANGES TO O	FFICERS A		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 truspe empowered to execute this 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: 3. 27.05 2.01.1319											
	e of Busines STREET 34103 Place of Busines STREET 34103 #, etc. Is 6. Name MICHELLI GE ST. FL 34103 e named entitions of regis Signature, types LE NOW!! ue by Se PSTD GORGA, 1325 RID NAPLES,	certify that the information supplied we for this report or supplemental report or suppleme	Place of Business TREET 34103 Place of Business #, etc. B Country 6. Name and Address of Current Regis MICHELLE 3E ST. FL 34103 Place and entity submits this statement for the place of registered agent. Segnature, typed or printed name of registered agent and title LE NOW!!! FEE IS \$150.00 ue by September 7, 2005 OFFICERS AND DIRECT ST. PSTD GORGA, MICHELLE 1325 RIDGE ST. NAPLES, FL 34103	Page of Business STREET 34103 SPACE of Business STREET 34103 SPACE of Business 3. Mailing Address Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Grity & State Country Zip 6. Name and Address of Current Registered Agent MICHELLE SE ST. FL 34103 Senature, typed or printed name of registered agent and title if applicable. INSTITUTE IN STRUCTURE Senature, typed or printed name of registered agent and title if applicable. Senature, typed or printed name of registered agent and title if applicable. Senature, typed or printed name of registered agent and accurate and accurate and fine in the printed continuation of the printed contin	Mailing Address STREET 1325 RIDGE STREET 1325 RIDGE STREET 34103 Place of Business 3. Mailing Address Place of Business 3. Mailing Address A, etc. Suite, Apt. #, etc. Ge City & State Country Zip Cour 6. Name and Address of Current Registered Agent MICHELLE 3E ST. FL 34103 FL 3	Mailing Address STREET 34103 Mailing Address 1325 RIDGE STREET MAPLES, FL 34103 Pace of Business J. Mailing Address 1325 RIDGE STREET MAPLES, FL 34103 Pace of Business J. Mailing Address J. Mailing	MS, INC. The of Business	Mailing Address TREET 1325 RIDGE STREET 1325 RIDGE ST. F. etc.	And Business STREET 312S RIDGE STREET 34103 NAPLES, FL 34103 Nation Address Size TALLA Nation Address Size TALLA NATION Size Size TA	Malling Address STREE 1325 RIDGE STREE 33103 NAPLES, FL 34103 NAPLES, FL 34103 Name and Address of Business 3. Mailing Address 4. FEI Number 59-3688010 Country Country Zip Country Zip	And Business Since of Business



Re: Division of Corporations Renewal

To whom it may concern,

I did not receive a bill for my annual renewal. Please accept my check enclosed for \$150.00

If you have any questions, please call me at 239-261-1319.

Thank you in advance and I sincerely apologize for any inconvenience.