

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000037460

Entity Name: HIDDEN DREAMS, INC.

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3219 CORTEZ BLVD  
FT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

3219 CORTEZ BLVD  
FT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 66-5110777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPARKS, MICHAEL  
3219 CORTEZ BLVD  
FT MYERS, FL 33901 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SPARKS, MICHAEL  
Address: 3219 CORTEZ BLVD  
City-St-Zip: FT MYERS, FL 33901

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

SIGNATURE: MICHAEL SPARKS

D

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date