

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073071

FILED  
Apr 24, 2004  
Secretary of State

Entity Name: INKPRESSIONS BODY ART INC.

## Current Principal Place of Business:

18901 S DIXIE HWY  
SUITE 182  
MIAMI, FL 33157 US

## New Principal Place of Business:

## Current Mailing Address:

18901 S DIXIE HWY  
SUITE 182  
MIAMI, FL 33157 US

## New Mailing Address:

10860 SW 158 LANE  
MIAMI, FL 33157 US

FEI Number: 41-2025606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSTOS, LUIS F  
12225 SW 119 TERR  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

BUSTOS, BEATRIZ E  
10860 SW 158 LANE  
MIAMI, FL 33157 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: BEATRIZ E BUSTOS

04/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUSTOS, LUIS F  
Address: 12713 SW 146 LANE  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BUSTOS, BEATRIZ E  
Address: 10860 SW 158 LANE  
City-St-Zip: MIAMI, FL 33157

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: BEATRIZ E BUSTOS

PD

04/24/2004

Electronic Signature of Signing Officer or Director

Date