

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000100529

Entity Name: STEADYIMAGE, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

1224 NE 4TH AVENUE
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 190321
FORT LAUDERDALE, FL 33319 US

New Mailing Address:

FEI Number: 65-1145565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADRIAN ALLEN
Address: 615 NW 108 TERRACE
City-St-Zip: PEMBORKE PINES, FL 33023

Title: S () Delete
Name: ALLEN, JHANA
Address: 10747 S PRESERVE WAY #204
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: VIVIANNE CHANCE
Address: 3817 JASMINE LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P () Delete
Name: O'LAMAR, GIBSON
Address: PO BOX 190321
City-St-Zip: FORT LAUDERDALE, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ADRIAN ALLEN
Address: 615 NW 108 TERRACE
City-St-Zip: PEMBORKE PINES, FL 33023

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VIVIANNE CHANCE

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date