## 2004 FÖR PROFIT CORPORATION **ANNUAL REPORT**

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

## **FILED** Jul 12, 2004 08:00 AM **DOCUMENT # P01000105503 Secretary of State** DESIGN IMPRESSIONS GALLERY, INC. Principal Place of Business Mailing Address 33 SO . PALM AVE. 33 SO . PALM AVE. SARASOTA, FL 34236 SARASOTA, FL 34236 CR2E034 (10/03) 07072004 No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-3123555 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MEIER, CAROL DO NOT WRITE 6910 HONEYSUCKLE TRAIL BRADENTON, FL 34202 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Due by September 3, 2004 10. OFFICERS AND DIRECTORS TITLE NAME MEIER, CAROL 6910 HONEYSUCKLE TRAIL STREET ADDRESS U00000165448 07/12/04-80014-008 158.75 CITY-57-ZIP BRADENTON, FL 34202 TITLE NAME STREET ADDRESS CRTY-ST-ZIP 7333 F NAME STREET ADDRESS DO NOT WRITE CITY-\$1-ZIP IN THIS SPACE THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ABORESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Ffurther 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with applications, with pill other, like empowered.

SIGNATURE AND TYPED OR PRESTED NAME OF SIGNING OFFICER OR DIRE