

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000044179

Entity Name: SENSATIONAL PLEASURES, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

3111 W DR MLK BLVD
SUITE 100
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

3111 W DR MLK BLVD
SUITE 100
TAMPA, FL 33607

New Mailing Address:

FEI Number: 01-0678272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOTRA, KATERYNA
3111 W DR MLK BLVD
SUITE 100
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

BETZ, JOHN
3111 W DR MLK BLVD
SUITE 100
TAMPA, FL 33607 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: JOHN BETZ

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COO () Delete
Name: BETZ, JOHN
Address: 3111 W DR MLK BLVD, SUITE 100
City-St-Zip: TAMPA, FL 33607

Title: P (X) Delete
Name: HOTRA, KATERYNA
Address: 3111 W DR MLK BLVD, SUITE 100
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JOHN BETZ

COO

01/05/2007

Electronic Signature of Signing Officer or Director

Date