2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000046194

1. Entity Name

PERFECT IMAGES OF SOUTH FLORIDA INC.



FILED Feb 07, 2008 08:00 Al Secretary of State

Principal Place of Business

19300 CHRISTMAS ROAD MIAMI, FL 33157 Mailing Address

19300 CHRISTMAS ROAD MIAMI, FL 33157



DO NOT WRITE IN THIS SPACE

01282008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 27-0009873
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHULER, MICHAEL K 19300 CHRISTMAS ROAD MIAMI, FL 33157

SIGNATURE:

DO NOT WRITE 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. Hyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULER, MICHAEL K 19300 CHRISTMAS ROAD MIAMI, FL 33157			U00000819287 02/15/08-80078-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		02/15/08-80078-013 150.00
TITLE NAME STREET ADDRESS CITY-SY-ZIP			DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS				
CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				344
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.				