

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000095906

1. Entity Name
DONE TODAY BEAUTIFUL TOMORROW, INC.



Principal Place of Business

5407 BLUE TICK DR.
ORLANDO, FL 32810

Mailing Address

5407 BLUE TICK DR.
ORLANDO, FL 32810

DO NOT WRITE IN THIS SPACE



02012005 No Chg-P CR2E034 (10/03)

4. FEI Number
82-0546974

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COVINGTON, CPA
380 S SR 434 STE 1004-188
ALTAMONTE SPRINGS, FL 32714

**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 typed or printed name of registered agent and title if applicable.

FRED WHITE

(NOTE: Registered Agent signature required when reinstating)

3/7/05

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WHITE, FRED L
STREET ADDRESS 5407 BLUE TICK DR.
CITY-ST-ZIP ORLANDO, FL 32810

TITLE SD
NAME WHITE, LISA H
STREET ADDRESS 5407 BLUE TICK DR.
CITY-ST-ZIP ORLANDO, FL 32810

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U00000258505
03/10/05-80043-021 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRED L. WHITE

DATE

3/9/05

Daytime Phone #