2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005
Secretary of State

DOCUMENT# P02000101626

Entity Name: SNUGGL'UP, INC.

Current Principal Place of Business:

19941 NE 22 AVE
N MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

1835 NE MIAMI GARDENS DR.
#121
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 03-0483865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC.
20801 BISCAYNE BLVD STE 505
AVENTURA, FL 33180 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: LIPSON, VALERIE
Address: 5450 ETHEL AVE
City-St-Zip: SHERMAN OAKS, CA 91401

Title: D ( ) Delete
Name: ADAMS, PEGGY
Address: 19941 NE 22 AVE
City-St-Zip: N MIAMI, FL 33180

Title: D ( ) Delete
Name: WEISMAN, SHARON G
Address: 4518 VARNA AVE
City-St-Zip: SHERMAN OAKS, CA 91423

Title: D ( ) Delete
Name: HODSON, KAREN M
Address: 2070 NE 194 TERR
City-St-Zip: N MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: ADAMS, PEGGY
Address: 19941 NE 22 AVE
City-St-Zip: N MIAMI BEACH, FL 33180

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 Section 119.07(3)(i), 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: KAREN MEISTER HODSON PRES 01/06/2005

Electronic Signature of Signing Officer or Director — Date