2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106825

City-St-Zip: ORLANDO, FL 32803

Entity Name: THE IMAGE WORKSHOP, INC.

FILED Mar 16, 2006 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|----------------------------------|------------------------------------|--|--|
| 1517 E AMELIA ST ORLANDO, FL 32803 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 1517 E AMELIA ST ORLANDO, FL 32803 | | | | |
| FEI Number: 01-0746568 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | New Registered Agent: | |
| BROWN, DOUGLAS 1517 E AMELIA ST ORLANDO, FL 32803 | US | | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | ent | Date | |
| Election Campaign Financi | ng Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: P (Name: BROWN, DOU Address: 1517 E AMEL | | Title: Name: | () Change () Addition | |

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: DOUGLAS BROWN PRES 03/16/2006