2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118921

Entity Name: IMAGERY DESIGNERS INK, INC.

FILED Jul 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

269 ALSACE AVE.380 E. DEARBORN STREETVENICE, FL 34293ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

269 ALSACE AVE.

VENICE, FL 34293

380 E. DEARBORN STREET
ENGLEWOOD, FL 34223

FEI Number: 05-0538198 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:

HANSCOM, JEFFERY H
269 ALSACE AVE.
VENICE, FL 34293 US
HANSCOM, JEFFERY H
380 E. DEARBORN STREET
ENGLEWOOD, FL 34223 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: JEFFERY H. HANSCOM 07/12/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HANSCOM, JEFFREY H. HANSCOM, JEFFERY H Name: Name: 269 ALSACE AVENUE Address: 380 E. DEARBORN STREET Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: ENGLEWOOD, FL 34223

Title: V () Delete Title: () Change () Addition

 Name:
 HANSCOM, KRISTIN
 Name:

 Address:
 25 ERSKINE DR.
 Address:

 City-St-Zip:
 VENICE, FL 34285
 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: JEFFERY H HANSCOM P 07/12/2004