

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000731

Entity Name: TRIM MAGIC, INC,

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

3126 HOUNDSWORTH CT., STE 208
ORLANDO, FL 32837

New Principal Place of Business:

3126 HOUNDSWORTH CT
SUITE 208
ORLANDO, FL 32837

Current Mailing Address:

3126 HOUNDSWORTH CT., STE 208
ORLANDO, FL 32837

New Mailing Address:

3126 HOUNDSWORTH CT
SUITE 208
ORLANDO, FL 32837

FEI Number: 81-0592331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINCAPIE, WILSON
2612 TEESIDE CRT
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

HINCAPIE, WILSON
3126 HOUNDSWORTH CT
SUITE 208
ORLANDO, FL 32837 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: WILSON HINCAPIE

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HINCAPIE, WILSON
Address: 2612 TEESIDE CRT
City-St-Zip: KISSIMMEE, FL 34746

Title: VP () Delete
Name: MANDRY, BLANCHE
Address: 2612 TEESIDE CRT
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HINCAPIE, WILSON
Address: 3126 HOUNDSWORTH CT SUITE 208
City-St-Zip: ORLANDO, FL 32837

Title: VP (X) Change () Addition
Name: MANDRY, BLANCHE
Address: 3126 HOUNNDSWORTH CT SUITE 208
City-St-Zip: ORLANDO, FL 32837

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: WILSON HINCAPIE

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date