2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001528

Entity Name: INFINITE POSSIBILITIES PUBLISHING GROUP, INC.

FILED Apr 08, 2004 Secretary of State

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

637 SANDPIPER LANE 460 SANDPIPER LANE CASSELBERRY, FL 32707

112

CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

637 SANDPIPER LANE PO BOX 150823

ALTAMONTE SPRINGS, FL 32715 CASSELBERRY, FL 32707

FEI Number: 04-3786975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PARRIS, SHELLEY ANNE 637 SANDPIPER LANE CASSELBERRY, FL 32707 PARRIS, SHELLEY ANNE 460 SANDPIPER LANE CASSELBERRY, FL 32707

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: 04/08/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: **PCFO** () Delete PARRIS, SHELLEY ANNE Name: 637 SANDPIPER LANE Address: City-St-Zip: CASSELBERRY, FL 32707

() Delete Title: CLYNE, PATRICIA Name: 637 SANDPIPER LANE Address: CASSELBERRY, FL 32707 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCFO. (X) Change () Addition PARRIS, SHELLEY ANNE Name: 460 SANDPIPER LANE, 112 Address: City-St-Zip: CASSELBERRY, FL 32707

Title: (X) Change () Addition

Name: LEBLANC, JOANNE 1316 E. 93RD STREET Address: BROOKLYN, NY 11236 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: SHELLEYANNE PARRIS 04/08/2004 **PCEO**