

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024459

Entity Name: FAUXSCAPES INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

4320 9TH ST W
LEIGHT ACRES, FL 33971

New Principal Place of Business:

4320 9TH ST W
LEHIGH ACRES, FL 33971

Current Mailing Address:

4320 9TH ST W
LEIGHT ACRES, FL 33971

New Mailing Address:

4320 9TH ST W
LEHIGH ACRES, FL 33971

FEI Number: 33-1043239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMAKER, KORY
4320 9TH ST W
LEIGHT ACRES, FL 33971 US

Name and Address of New Registered Agent:

HAMAKER, KORY
4320 9TH ST W
LEHIGH ACRES, FL 33971 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: KORY HAMAKER

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAMAKER, KORY
Address: 4320 9TH ST W
City-St-Zip: LEIGHT ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAMAKER, KORY
Address: 4320 9TH ST W
City-St-Zip: LEHIGH ACRES, FL 33971

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: KORY HAMAKER

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date