## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000029874

City-St-Zip:

Entity Name: DREAM MANAGEMENT INC.

**FILED** May 14, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5105 WEST CYPRESS STREET TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 5105 WEST CYPRESS STREET TAMPA, FL 33607 FEI Number: 20-0010437 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, SHIRLEY M 11850 M L KING STREET NO. #14104 SAINT PETERSBURG, FL 33716 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SMITH, DELAVAN H PRES Name: Name: 121 32ND AVE N Address: Address: City-St-Zip: ST PETERSBURG, FL 33704 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: SMITH, SHIRLEY M TREAS Name: 11850 M L KING STREET NO. #14104 Address: Address: ST PETERSBURG, FL 33716 US

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHIRLEY SMITH 05/14/2008 SEC