

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051416

FILED
Apr 20, 2009
Secretary of State

Entity Name: REALITY WORKS INC.

Current Principal Place of Business:

21751 DEBRAY DR.
SPRING, TX 77388 US

New Principal Place of Business:

9616 WINDRIFT CIRCLE
FORT PIERCE, FL 34945 US

Current Mailing Address:

21751 DEBRAY DR.
SPRING, TX 77388 US

New Mailing Address:

FEI Number: 55-0831884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMPSON, JAMAL
1013 GREENPINE BLVD. A-1
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

THOMPSON, JAMAL
9616 WINDRIFT CIRCLE
FORT PIERCE, FL 34945 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: JAMAL THOMPSON

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: THOMPSON, JAMAL
Address: 1013 GREEN PINE BLVD A-1
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D () Delete
Name: HAMPTON, LISCENT
Address: 100 SUGARWOOD CRESCENT
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: D (X) Delete
Name: THOMPSON, ALEXZANDER
Address: 21751 DEBRAY DR.
City-St-Zip: SPRING, TX 77388 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: THOMPSON, JAMAL
Address: 9616 WINDRIFT CIRCLE
City-St-Zip: FORT PIERCE, FL 34945 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JAMAL THOMPSON

CEO

04/20/2009

Electronic Signature of Signing Officer or Director

Date