2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086073

Entity Name: THE HOT SPOT TANNING COMPANY

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:					
1638 SPOTTSWOOD CIRCLE PALM HARBOR, FL 34683			3130 TAMPA RD. STE 7 OLDSMAR, FL 34677 US					
Current Mailing Address:			New Mailing Address:					
3322 33623								
FEI Number: 35-2210906 FEI Number Applied For() FEI Nu			ımber Not Applicable () Co			Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
3468 3468	3 US	urpose of cha	nging it	ts registere	ed office or	registered a	gent, or both,	
Ξ:								
Electronic Signature of Registered Agent						Date		
aign Financing	Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
PAOLINI, ROBÉI 1638 SPOTTSW	RT G II OOD CIRCLE	Name Addre	e: ess:		() Change	() Addition		
()	Delete	Name Addre	e :	17406 ISA	STEPHEN E BELLE ANN V			
	SWOOD CIRSOR, FL 3468 Siling Address Siling Siling Siling Siling Siling Financing AND DIRECT Department of the company of	SWOOD CIRCLE SOR, FL 34683 Iling Address: 3322 33623 5-2210906 FEI Number Applied For () Address of Current Registered Agent: DBERT G II SWOOD CIRCLE SOR, FL 34683 US amed entity submits this statement for the pof Florida. Electronic Signature of Registered Age raign Financing Trust Fund Contribution (). AND DIRECTORS:	SWOOD CIRCLE SOR, FL 34683 STE OLD Sling Address: New S322 33623 S-2210906 FEI Number Applied For () Address of Current Registered Agent: Named Part G II SWOOD CIRCLE SOR, FL 34683 STE Electronic Signature of Registered Agent Signature of	SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR New Mailing Address: New Mailing Address of Current Registered Agent: Name and OBERT G II SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR Name and OBERT G II SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR Name and OBERT G II SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR Name and OBERT G II SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR Name and OBERT G II SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR Name and OBERT G II SWOOD CIRCLE SIGNATION AND DIRECTORS: ADDITION AND DIRECTORS: DO () Delete PAOLINI, ROBERT G II SIGNATION Name: Address: City-St-Zip: Name: Address: Address: Address: Address:	SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR, FL 3467 New Mailing Address: New Mailing Address STE 7 OLDSMAR, FL 3467 New Mailing Address Name and Address Name and Address DEFT G II SWOOD CIRCLE SOR, FL 34683 US STE 7 OLDSMAR, FL 3467 Name and Address Defectionic Signature of Registered Agent STE Name and Address Title: Name:	SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR, FL 34677 SIIng Address: New Mailing Address: S322 S33623 S-2210906 FEI Number Applied For () FEI Number Not Applicable () Certific Address of Current Registered Agent: Name and Address of New Research Support	SWOOD CIRCLE SOR, FL 34683 STE 7 OLDSMAR, FL 34677 US New Mailing Address: New Mailing Address: New Mailing Address: Steppont of the Number Not Applicable () Certificate of Status Address of Current Registered Agent: Name and Address of New Registered Agent SWOOD CIRCLE SOR, FL 34683 US STE 7 OLDSMAR, FL 34677 US New Mailing Address: Name and Address of New Registered Agent and Address of New Registered Agent and Address of New Registered Agent and Florida. Electronic Signature of Registered Agent Date ADDITIONS/CHANGES TO OFFICERS AND Title: Name: ADDITIONS/CHANGES TO OFFICERS AND Name: Address: Address: Address: City-St-Zip: () Delete Title: D () Change () Addition Name: KAPLAN, STEPHEN E Address: 17406 ISABELLE ANN WAY	

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: STEPHEN E KAPLAN D 04/25/2005