2005 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Name	EXPRESSIONS, INC. e of Business M DR 1	ailing Address 1810 CUE DR PANAMA CITY, FL 32404		· · · · · · · · · · · · · · · · · · ·		
DO NOT WRITE IN THIS SPACE				04192005 4. FEI Number 20-02106 5. Certificate of	No Chg-P CR:	PE034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
11810 CUE PANAMA (CITY, FL 32404			IN T	NOT WRIT	E
8. The above named entity submits this statement for the purpose of changing its registered office or registered by the obligations of registered agent. Signature, typed or prifited name of registered agent and title if applicable. (NOTE: Registered Agent signature required)					in the State of Florida. I	am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After iMay 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees 10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	D THOMAS, THERESA T 11810 CUE DR PANAMA CITY, FL 32404 D		TM 20 27 *	O	U00000323474 4/22/05-60056-	008 150.00
NAME STREET ADDRESS CITY-ST-ZIP	THOMAS, TIMOTHY D 11810 CUE DR PANAMA CITY, FL 32404	, i.	orne V			
NAME STREET ADDRESS CITY-ST-ZIP	11.17			DO I	NOT WRI	ΓΕ
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: // / / / / / / / / / / / / / / SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date						