## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000122647

Entity Name: FASHION SENSE, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14210 CYBER PL 14210 CYBER PL APT. 303 APT. 303

TAMPA, FL 33613 TAMPA, FL 33613 US

Current Mailing Address: New Mailing Address:

14210 CYBER PL 5408 ST JAMES DRIVE

APT. 303 NEW PORT RICHEY, FL 34652 US TAMPA, FL 33613

FEI Number: 30-0212144 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:

LYONS, GARY W DREW, KELLY

311 SOUTH MISSOURI AVENUE 5408 ST JAMES DRIVE

CLEARWATER, FL 33756 US NEW PORT RICHEY, FL 34652 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: KELLY DREW 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PTD (X) Change ( ) Addition Name: GUZELEE, BUGRA Name: GUZELCE, BUGRA

 Address:
 14210 CYBER PL., #303
 Address:
 14210 CYBER PL., #303

 City-St-Zip:
 TAMPA, FL 33613
 City-St-Zip:
 TAMPA, FL 33613 US

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 GUZELEE, KAYHAN
 Name:
 GUZELCE, KAYHAN

 Address:
 14210 CYBER PL, #303
 Address:
 14210 CYBER PL, #303

 City-St-Zip:
 TAMPA, FL 33613
 City-St-Zip:
 TAMPA, FL 33613 US

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: BUGRA GUZELCE PRES 04/29/2005