2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144821

ODECIAL MOMENTO DV OLICANI INIC

FILED May 02, 2005 Secretary of State

Entity Name: Special Moments by Susan, Inc.			
Current Principal Place of Business:	New Principal Place of B	New Principal Place of Business:	
3332 DEL PRADO BOULEVARD CAPE CORAL, FL 33904	1938 SUWANEE AVE. FORT MYERS, FL 33901		
Current Mailing Address:	New Mailing Address:		
2022 ACADEMY BOULEVARD CAPE CORAL, FL 33990 US	1938 SUWANEE AVE FORT MYERS, FL 33901	US	
FEI Number: 03-0532033 FEI Number Applied For () F	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
PEREZ, SUSAN R 2022 ACADEMY BOULEVARD CAPE CORAL, FL 33990 US			
The above named entity submits this statement for the purp in the State of Florida.	ose of changing its registered offi	ce or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not red Election Campaign Financing Trust Fund Contribution().	ceive the prior notice.		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO	IONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P () Delete	Title: P (X) C	hange()Addition	

PEREZ, SUSAN R PEREZ, SUSAN R Name: Name: 2022 ACADEMY BOOULEVARD 2022 ACADEMY BOULEVARD Address: Address: City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: CAPE CORAL, FL 33990 US

Title: () Delete Title: () Change () Addition

PEREZ, ARNALDO Name: Name: Address: 2022 ACADEMY BOULEVARD Address: CAPE CORAL, FL 33990 US City-St-Zip: City-St-Zip:

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: SUSAN R. PEREZ Ρ 05/02/2005