FILED
May 31, 2005 8:00 am
Secretary of State
05-04-2005 90114 037 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P04000012803

1. Entity Name
AD GALS OF TAMPA, INC.

66020308

05022005 Chg-P CR2E034 (10/03)

Principal Place of Business	Mailing Address
5014 HOMER AVENUE TAMPA, FL 33629	5014 HOMER AVENUE TAMPA, FL 33629

2. Principal Place of Business: 3508 Santiago St. W.	3. Mailing Address: 3508 Santiago St W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33629 Country: USA	Zip: 33629 Country: USA

4. FEI Number: 20-0598644 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SWEDBERG-ANDERSON, TRUDY J 5014 HOMER AVENUE TAMPA, FL 33629	Name: Swedberg-Anderson Trudy J Street Address (P.O. Box Number is Not Acceptable): 3508 Santiago St. W. Tampa, FL 33629 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEDBERG-ANDERSON, TRUDY J 5014 HOMER AVENUE TAMPA, FL 33629	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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.

Trudy J Swedberg-Anderson May 1, 2005 813-258-3668