


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90064 028 ***150.00

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| DOCUMENT # P0400004872 |  |
| 1. Entity Name TIMELESS PHOTOS, INC. | |

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| Principal Place of Business 11307 VIA ANDIAMO WINDERMERE, FL 34786 | Mailing Address 11307 VIA ANDIAMO WINDERMERE, FL 34786 |
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40013973

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| 2. Principal Place of Business 11307 Via Andiamo Suite, Apt. #, etc. | 3. Mailing Address 11307 Via Andiamo Suite, Apt. #, etc. |
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|--------------------------------------|--------------------------------------|
| City & State Windermere FL | City & State Windermere FL |
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|---------------------|-----------------------|---------------------|-----------------------|
| Zip 34786 | Country USA | Zip 34786 | Country USA |
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01172005 Chg-P CR2E034 (10/03)

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| 4. FEI Number 56244494 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 | |
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| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| 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 *R. Dunham* (all same) 2/1/84
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 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|------------------------------------------------|--------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD DUNHAM, DONNA L 11307 VIA ANDIAMO WINDERMERE, FL 34786 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *R. Dunham* 2/1/84
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #