

# **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000055189

Entity Name: BOTTLE MASSAGER, INC.

**FILED**  
**Feb 11, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

61 GREENS RD.  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

61 GREENS RD.  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 20-0938481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRIMSLEY, JODI K  
61 GREENS RD.  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

SAMI, SAM  
8181 W BROWARD BLVD #350  
PLANTATION, FL 33324 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: SAM SAMI

02/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GRIMSLEY, JODI K  
Address: 61 GREENS RD.  
City-St-Zip: HOLLYWOOD, FL 33021

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JODI GRIMSLEY

DIR

02/11/2005

Electronic Signature of Signing Officer or Director

Date