

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101481

Entity Name: PRO LASER IMAGE, INC.

FILED  
Jan 10, 2005  
Secretary of State

## Current Principal Place of Business:

3625 ODOM DRIVE  
NEW PORT RICHEY, FL 34652

## New Principal Place of Business:

## Current Mailing Address:

3625 ODOM DRIVE  
NEW PORT RICHEY, FL 34652

## New Mailing Address:

FEI Number: 20-1354975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEIZO, CHRIS  
3625 ODOM DRIVE  
NEW PORT RICHEY, FL 34652 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GARGUILO, JOSEPH  
Address: 3625 ODOM DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DVST ( ) Delete  
Name: MEIZO, CHRIS  
Address: 3625 ODOM DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DV ( ) Delete  
Name: GARGUILO, ROBERT  
Address: 3625 ODOM DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DV ( ) Delete  
Name: ANFUSO, ERIC  
Address: 3625 ODOM DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GARGUILO, JOSEPH  
Address: 13364 MAUREEN AVE  
City-St-Zip: SPING HILL, FL 34609

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: GARGUILO, ROBERT  
Address: 4571 MITCHER RD.  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: CHRIS MEIZO

VP

01/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date