2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 10, 2005 8:00 am Secretary of State

DOCUMENT # P04000127275 1. Entity Name LIGHTHOUSE DREAMS, INC Principal Place of Business Mailing Address			. '		02-10-2005 90052 050 ***150.00			50.00
Principal Place	e of Business	Mailing Address		<u> </u>	1			
1504 OBEAR		1504 OBEAR COURT					F001	2141
WESLEY CHAPEL, FL 33543 US		WESLEY CHAPEL, FL 33543 US		50013101				
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2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01142005	<u>.</u>	E034 (10/03)	
City & State	9	City & State			4. FEI Numbe	1593485	<u> </u>	plied For t Applicable
Zìp	Country	Zip	Coun	itry	5. Certificate	of Status Desired	\$8.75 Add Fee Required	
<u>.</u>	6. Name and Address of Current	Registered Agent		Name -	7. Name and	Address of New Registere	d Agent	
JOHNSON	L PAUL J			Name				
1504 OBEA	AR COURT CHAPEL, FL 33543			Street Address	(P.O. Box Numbe	r is Not Acceptable)		
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				City		F	Zip Code	э
	named entity submits this statement foions of registered agent.	r the purpose of changing its	register	ed office or registe	ered agent, or bot	h, in the State of Florida. I a	rn familiar with,	and accept
SIGNATURE_								
SIGNATORIE	Signature, typed or printed name of registered agent	and title if applicable. (NQTE	: Registere	d Agent signature require	d when reinstating)	DAT	E	
		 						
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campai Trust Fund Cont			5.00 May Be ded to Fees		<u>-</u>	
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	Trust Fund Cont		Add	5.00 May Be ded to Fees	CHANGES TO OFFICERS A		S IN 11
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After Ma	OFFICERS AND D/P JOHNSON, PAUL J	Trust Fund Cont	11. TITL	E E	5.00 May Be ded to Fees		ND DIRECTOR	
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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: X JOHNSON P.J. JOHNSON SIGNATURE: SIGNATURE OF SIGNAND OFFICER OF DIRECTOR P.J. JOHNSON

727 460-757 Daytime Phone #