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2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

05 DEC -8 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000135747

1. Entity Name
NO LIMIT CONCEPTS, INC.

Principal Place of Business	Mailing Address
3320 NORTH 37TH ST. HOLLYWOOD, FL 33021	3320 NORTH 37TH ST. HOLLYWOOD, FL 33021

09132005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
361 E. Sheridan St Suite, Apt. #, etc. #412	Suite, Apt. #, etc.
City & State Dania, FL	City & State
Zip 33004 Country	Zip Country

4. FEI Number 20-1686770 ☐ 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
QUINTO, THEODORE 3320 NORTH 37TH ST. HOLLYWOOD, FL 33021	Name QUINTO, THEODORE Street Address (P.O. Box Number is Not Acceptable) 361 E. Sheridan St. #412 City Dania FL Zip Code 33004

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 _____ DATE
Signature, type or printed name of registered agent And, if applicable, (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by October 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	PD QUINTO, THEODORE 3320 NORTH 37TH ST. HOLLYWOOD, FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD QUINTO, THEODORE 361 E. Sheridan St. #412 Dania, FL 33004	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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	500060494285 10/11/05--01047--026 **150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	* Rejected in error - 10/17 - Re w/o penalty	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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 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: _____ 10/7/05 305-984-7578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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10/7/05

Division of Corporation
PO Box 1500
Tallahassee, FL 32301-1500

Re: Annual Corp. Report

To whom it may concern,

I just recently received notice that I needed to file and pay this annual report. The address that it original went to was vacated more than 6 months ago. I respectfully request that the late payment fee be dismissed due to having not ever received the notice in my mail forwarding.

Thanks in Advance,

Theodore Quinto
President

No Limit Concepts, Inc
361 E. Sheridan St. #2
Dania, FL 33004