


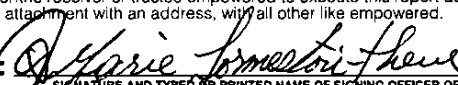


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90265 017 ***150.00

DOCUMENT # P04000141991 1. Entity Name THEME'S ENTERPRISES, CORP.					
Principal Place of Business 2251 SW 67TH AVE MIRAMAR, FL 33023-2746			Mailing Address 2251 SW 67TH AVE MIRAMAR, FL 33023-2746		
2. Principal Place of Business 330 S.W. 194TH AVE Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State PEMBROKE LINES FL.		City & State		4. FEI Number 86-111-7471	
Zip 33029		Country FLORIDA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THEME, MARIE L 2251 SW 67TH AVE MIRAMAR, FL 33023-2746				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:  April 15th 2005 <small>(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>					
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	D THEME, THEODULE 2251 SW 67TH AVE MIRAMAR, FL 330232746	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	THEME THEODULE UP/D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THEME, MARIE L 2251 SW 67TH AVE MIRAMAR, FL 330232746	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	330 S.W. 194TH AVE PEMBROKE LINES, FL. 33029.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THEME, MARIE L 2251 SW 67TH AVE MIRAMAR, FL 330232746	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	THEME MARIE L PRES/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: 			04-15-04 954-538-9103 <small>Date Daytime Phone #</small>		