2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2005
Secretary of State

DOCUMENT# P04000157754

Entity Name: SARANDIPITOUS SLIPPERS, INC.

Current Principal Place of Business:

929 S.E. 13TH AVENUE
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

1464 S.E. 5TH PLACE
DEERFIELD BEACH, FL 33441 US

Current Mailing Address:

929 S.E. 13TH AVENUE
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

1464 S.E 5TH PLACE
DEERFIELD BEACH, FL 33441 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HITCHENS, LOU ANN
1464 S.E. 5TH PLACE
DEERFIELD BEACH, FL 33441 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: P/D ( ) Delete
Name: HITCHENS, LOU ANN
Address: 1464 S.E. 5TH PLACE
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: VP/D ( ) Delete
Name: BEAMES, ANDRA
Address: 929 S.E. 13TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: SEC ( ) Delete
Name: BEAMES, ANDRA
Address: 929 S.E. 13TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LOU ANN HITCHENS P/D 04/24/2005

Electronic Signature of Signing Officer or Director — Date