2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036218

Entity Name: BEGINNINGS EVENT PLANNING INC

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1022 OLIVE TREE CIRCLE 12143 ROSEDALE TERRACE
GREENACRES, FL 33413 US BOYNTON BEACH, FL 33437 US

Current Mailing Address: New Mailing Address:

1022 OLIVE TREE CIRCLE
GREENACRES, FL 33413 US

12143 ROSEDALE TERRACE
BOYNTON BEACH, FL 33437 US

FEI Number: 20-2458964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHN PORTER ACCOUNTING INC 400 S FEDERAL HWY 404 BOYNTON BEACH, FL 33435 US NANCY HANLON ASSOCIATES, INC. 6266 S. CONGRESS AVE #L5 LANTANA, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NANCY HANLON 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: SHAFFER, JENNIFER L
Address: 1022 OLIVE TREE CIRCLE Address: 12143 ROSEDALE TERRACE
City St. Zip: GREENACRES EL 33413 LIS

City-St-Zip: GREENACRES, FL 33413 US City-St-Zip: BOYNTON BEACH, FL 33437 US

 Title:
 () Delete
 Title:
 S () Change (X) Addition

 Name:
 Name:
 SHAFFER, ROBERT

 Address:
 Address:
 12143 ROSEDALE TERRACE

 City-St-Zip:
 City-St-Zip:
 BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JENNIFER SHAFFER P 04/26/2007