# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000037998

Entity Name: MULTIDIMENSIONS, INC

## FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess.

15841 PINES BLVD. 320 S. FLAMINGO ROAD

SUITE 117 #151

PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027

**Current Mailing Address: New Mailing Address:** 

320 S. FLAMINGO ROAD 15841 PINES BLVD.

SUITE 117 #151

PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027

FEI Number: 20-2504723 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:

RICHARDSON, DOROTHY L MRS. STEPHENS, LAVERNE L MRS. 1100 SW 130TH AVENUE 1100 SW 130TH AVENUE

H-207 H-207

PEMBROKE PINES, FL 33027 US PEMBROKE PINES, FL 33027 US

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: LAVERNE L. STEPHENS 04/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition STEPHENS, LA VERNE L MS. STEPHENS, LA VERNE L MS. Name: Name: 13001 SW 11TH CT., A-207 1100 SW 130TH AVE. H-207 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33027

Title: Title: () Change () Addition () Delete

TUCKER, GWENDOLYN V MRS Name: Name: 843 RICH DRIVE, #104 Address: Address: DEERFIELD BEACH, FL 33441 City-St-Zip: City-St-Zip:

Title: Title: () Delete SEC ( ) Change (X) Addition Name: RICHARDSON, DOROTHY L MRS Name: 1100 SW 130TH AVE. H-207 Address: Address: City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify 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: LAVERNE L. STEPHENS 04/30/2007 P,T