2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051256

Entity Name: SHATTERED IMAGES, INC.

FILED Apr 10, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

2955 W. 80TH STREET, APT. 201 2360 PINE NEEDLE COURT HIALEAH GARDENS, FL 33018 PEMBROKE PINES, FL 33026

Current Mailing Address: New Mailing Address:

2955 W. 80TH STREET, APT. 201 2360 PINE NEEDLE COURT HIALEAH GARDENS, FL 33018 PEMBROKE PINES, FL 33026

FEI Number: 20-2644417 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:

BRENT, JOE

2360 PINE NEEDLES COURT
PEMBROKE PINES, FL 33026 US

BRINKHURST, DUNCAN
3861 WEST STATE ROAD 84 #103
DAVIE, FL 33312 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: DUNCAN BRINKHURST 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition

 Name:
 BRENT, JOE
 Name:
 BRENT, JOE

 Address:
 2360 PINE NEEDLE CORUT
 Address:
 2360 PINE NEEDLE CORUT

City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: PEMBROKE PINES, FL 33026

Title: VST () Delete Title: D (X) Change () Addition Name: NIEBLAS. BRYAN Name: NIEBLAS. BRYAN

Address: 2955 W. 80TH STREET, APT 201 Address: 9239 WEST SUNRISE BLVD

City-St-Zip: HIALEAH GARDENS, FL 33018 City-St-Zip: PLANTATION, FL 33322

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

 Name:
 Name:
 BRINKHURST, DUNCAN

 Address:
 Address:
 3861 STATE ROAD 84 # 103

City-St-Zip: City-St-Zip: DAVIE, FL 33312

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: DUNCAN BRINKHURST D 04/10/2006