2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# P05000051256

Entity Name: SHATTERED IMAGES, INC.

Current Principal Place of Business:

2360 PINE NEEDLE COURT
PEMBROKE PINES, FL 33026

New Principal Place of Business:

1203 NW 125 TERRACE
SUNRISE, FL 33323

Current Mailing Address:

2360 PINE NEEDLE COURT
PEMBROKE PINES, FL 33026

New Mailing Address:

1203 NW 125 TERRACE
SUNRISE, FL 33323

FEI Number: 20-2644417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRENT, JOE
8360 PINE NEEDLE COURT
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

BRENT, JOE
1203 NW 125 TERRACE
SUNRISE, FL 33323 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: _____ 02/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BRENT, JOE
Address: 2360 PINE NEEDLE CORUT
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete
Name: NIEBLAS, BRYAN
Address: 9239 WEST SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322

Title: D (X) Delete
Name: BRINKHURST, DUNCAN
Address: 3861 STATE ROAD 84 # 103
City-St-Zip: DAVIE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: NIEBLAS, BRYAN
Address: 9836 NOB HILL LN
City-St-Zip: SUNRISE, FL 33351

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

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: BRYAN NIEBLAS D 02/27/2009
Electronic Signature of Signing Officer or Director — Date