2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082990

Entity Name: WILD DREAMS, INC.

FILED Jan 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1710 MONTANA AVENUE, NE 204 37TH AVENUE, NORTH

ST. PETERSBURG, FL 33703 162

ST. PETERSBURG, FL 33704

Current Mailing Address: New Mailing Address:

1710 MONTANA AVENUE, NE 204 37TH AVENUE, NORTH ST. PETERSBURG, FL 33703 162

ST. PETERSBURG, FL 33704

FEI Number: 20-2967829 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:

DREAMWEB OFFICE CONSULTANTS, INC. DREAMWEB OFFICE CONSULTANTS, INC.

11404 SUNCREEK PLACE 11404 SUNCREEK PLACE
TEMPLE TERRACE, FL FL US TEMPLE TERRACE, FL 33617 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: CAROLINE MCKEON 01/25/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: WILD, JEFFREY H Name: WILD, JEFFREY H
Address: 1710 MONTANA AVENUE, NE Address: 204 37TH AVENUE, NORTH SUITE 162

City-St-Zip: ST. PETERSBURG, FL 33703 City-St-Zip: ST. PETERSBURG, FL 33704

Title: VP () Delete Title: VP (X) Change () Addition Name: WILD, JACQUELINE W Name: WILD, JACQUELINE W

Address: 1710 MONTANA AVENUE, NE Address: 204 37TH AVENUE, NORTH SUITE 162

City-St-Zip: ST. PETERSBURG, FL 33703 City-St-Zip: ST. PETERSBURG, FL 33704

Title: D () Delete Title: D (X) Change () Addition Name: MCKEON, CAROLINE Name: MCKEON, CAROLINE

Address: 11404 SUNCREEK PLACE
City-St-Zip: TEMPLE TERRACE, FL 33617
Address: 11404 SUNCREEK PLACE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

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: JEFFREY H. WILD P 01/25/2006