

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108869

Entity Name: OCALA TATTOO, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

1905 SOUTHWEST COLLEGE ROAD
SUITE 1 AND 2
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

1905 SOUTHWEST COLLEGE ROAD
SUITE 1 AND 2
OCALA, FL 34474

New Mailing Address:

FEI Number: 20-3247844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, BOWLUS, DUSS, MORGAN ET AL, P.A.
10110 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOVEY, JUSTEN
Address: 9661 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

Title: PD () Delete
Name: HOVEY, JUSTEN
Address: 9661 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD () Delete
Name: OLEARY, CHRISTIAN
Address: 3240 SOUTHWEST 34TH AVE., #305
City-St-Zip: OCALA, FL 34474

Title: STD () Delete
Name: HOVEY, CHRISTINA
Address: 9661 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOVEY, JUSTEN
Address: 9761 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

Title: PD (X) Change () Addition
Name: HOVEY, JUSTEN
Address: 9761 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

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

Title: STD (X) Change () Addition
Name: HOVEY, CHRISTINA
Address: 9761 VICEROY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

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: CHRISTINA HOVEY

STD

04/26/2006

Electronic Signature of Signing Officer or Director

Date