

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130780

FILED
Jul 06, 2006
Secretary of State

Entity Name: NEMO'S 2, INC.

Current Principal Place of Business:

6722 ORCHID LAKE RD
NEW PORT RICHEY, FL 34653 11

New Principal Place of Business:

2938 SHIPSTON AVENUE
NEW PORT RICHEY, FL 34655 11

Current Mailing Address:

6722 ORCHID LAKE RD
NEW PORT RICHEY, FL 34653

New Mailing Address:

2938 SHIPSTON AVENUE
NEW PORT RICHEY, FL 34655

FEI Number: 20-3521124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HLOSKA, CHRISTOPHER S
6722 ORCHID LAKE RD
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

HLOSKA, LORI L
2938 SHIPSTON AVENUE
NEW PORT RICHEY, FL 34655 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: LORI L. HLOSKA

07/06/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HLOSKA, LORI
Address: 6722 ORCHID LAKE RD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP () Delete
Name: HLOSKA, CHRISTOPHER S
Address: 6722 ORCHID LAKE RD
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HLOSKA, LORI L
Address: 2938 SHIPSTON AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34655

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

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: LORI L. HLOSKA

P

07/06/2006

Electronic Signature of Signing Officer or Director

Date