

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000083864

Entity Name: VIVID STYLE, INC.

FILED
Mar 29, 2007
Secretary of State

Current Principal Place of Business:

351 ST. ARMANDS CIRCLE
SARASOTA, FL 342361312

New Principal Place of Business:

Current Mailing Address:

PO BOX 17675
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 20-5083766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHREN, PAUL J
5960 MIDNIGHT PASS ROAD UNIT 75
SARASOTA, FL 34242 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: D () Delete
Name: CHREN, PAUL J
Address: 5960 MIDNIGHT PASS RD UNIT 75
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: CHREN, ELIZABETH B
Address: 5960 MIDNIGHT PASS RD UNIT 75
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PAUL CHREN

D

03/29/2007

Electronic Signature of Signing Officer or Director

Date