2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121939

Entity Name: FIRST IMPRESSIONS PROFESSIONAL SERVICES INC

FILED Mar 06, 2007 Secretary of State

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

4417 13TH STREET 65 3RD STREET NW

SUITE 152 SUITE 203

ST. CLOUD, FL 34769 US WINTER HAVEN, FL 33881 US

Current Mailing Address: New Mailing Address:

4417 13TH STREET 65 3RD STREET NW

SUITE 152 SUITE 203

ST. CLOUD, FL 34769 US WINTER HAVEN, FL 33881 US

FEI Number: 20-5543110 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:

NOBLITT, CURT W
4417 13TH STREET
4417 13TH STREET
851 SUITE 152
801TE 203

ST. CLOUD, FL 34769 US WINTER HAVEN, FL 33881 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: 03/06/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 NOBLITT, CURT W
 Name:
 NOBLITT, CURT W

 Address:
 4417 13TH STREET
 Address:
 65 3RD STREET NW

 City-St-Zip:
 ST. CLOUD, FL 34769
 City-St-Zip:
 WINTER HAVEN, FL 33881

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BERGMAN, THOMAS C
 Name:
 BERGMAN, THOMAS C

 Address:
 4417 13TH STREET
 Address:
 65 3RD STREET NW

 City-St-Zip:
 ST. CLOUD, FL 34769
 City-St-Zip:
 WINTER HAVEN, FL 33881

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: CURTIS W NOBLITT PRES 03/06/2007