

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000125445

Entity Name: GOOD IMAGE INC.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6399 BLUE BAY CIRCLE  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

872 NW 35TH STREET  
OAKLAND PARK, FL 33309 US

**New Mailing Address:**

FEI Number: 20-5653894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAVORY, OREN  
6399 BLUE BAY CIRCLE  
LAKE WORTH, FL 33467 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

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: TAVORY, OREN  
Address: 6399 BLUE BAY CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467 FL

I hereby 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 all other like empowered.

SIGNATURE: OREN TAVORY

PRES

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date