

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000003881

FILED  
Mar 25, 2008  
Secretary of State

**Entity Name:** PREMIER IMAGE EVENT COORDINATOR, INC.

**Current Principal Place of Business:**

10175 COLLINS AVE - # 1806  
BAL HARBOR, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

10175 COLLINS AVE - # 1806  
BAL HARBOR, FL 33154

**New Mailing Address:**

**FEI Number:** 20-8219595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAPIRO, VICTORIA  
10175 COLLINS AVE - # 1806  
BAL HARBOR, FL 33154 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: SHAPIRO, VICTORIA  
Address: 10175 COLLINS AVE - # 1806  
City-St-Zip: BAL HARBOR, FL 33154

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

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

I hereby certify that the information supplied with this filing does not qualify 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:** VICTORIA SHAPIRO

PD

03/25/2008

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

\_\_\_\_\_  
Date