2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2005
Secretary of State

DOCUMENT# P93000042058

Entity Name: ULTIMATE AMUSEMENTS, INCORPORATED

Current Principal Place of Business:

PO BOX 570133
ORLANDO, FL 328570133 US

New Principal Place of Business:

5025 HAINES CIRCLE
ORLANDO, FL 32822 US

Current Mailing Address:

PO BOX 570133
ORLANDO, FL 328570133 US

New Mailing Address:

5025 HAINES CIRCLE
ORLANDO, FL 32822 US

FEI Number: 59-3199081 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILLARD, TOM
5025 HAINES CR.
ORLANDO, FL 32822 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

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: D ( ) Delete
Name: MILLARD, TOM
Address: 5025 HAINES CR.
City-St-Zip: ORLANDO, FL 32822

Title: D ( ) Delete
Name: BROWN, CHRISTOPHER R
Address: 11640 COUNTY RD 474
City-St-Zip: CLERMONT, FL 34711

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 Section 119.07(3)(i), 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: TOM MILLARD D 05/19/2005

Electronic Signature of Signing Officer or Director Date