

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050142

Entity Name: SOUND IMPRESSIONS, INC.

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

180 PORT SIDE AVE.
#204
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

1872 HATHAWAY PT. RD
SAINT ALBANS, VT 05478

New Mailing Address:

FEI Number: 59-3194714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUILLARD, GAIL E
180 PORT SIDE AVE
#204
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

ROUILLARD, GAIL E
180 PORTSIDE AVE
#204
CAPE CANAVERAL, FL 32920 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:

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROUILLARD, GAIL E
Address: 1782 HATHAWAY PT RD
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROUILLARD, GAIL E
Address: 1782 HATHAWAY PT RD
City-St-Zip: ST ALBANS, VT 05478

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: GAIL E ROUILLARD

P

01/11/2008

Electronic Signature of Signing Officer or Director

Date