


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 04, 2008 8:00 am**  
**Secretary of State**


06-04-2008 90002 024 \*\*\*150.00

<b>DOCUMENT # P94000021717</b>	
1. Entity Name <b>APPEARANCE DYNAMICS, INC.</b>	

Principal Place of Business <b>4783 VIA PALM LAKES #111 WEST PALM BEACH, FL 33417</b>	Mailing Address <b>4783 VIA PALM LAKES #111 WEST PALM BEACH, FL 33417</b>
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DO NOT WRITE IN THIS SPACE

40107477



04302008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0470993</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent	
<del>CORRADO, RICHARD</del> <del>4783 VIA PALM LAKES</del> <del>#111</del> <del>SAINT PETERSBURG, FL 33714</del>	<b>ADDRESS CHANGE:</b> <b>CORRADO, RICHARD</b> <b>7119 71ST WAY</b> <b>WEST PALM Bch, FL</b> <b>33407</b>

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Richard Corrado* DATE: 4/30/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>CORRADO, RICHARD</b> <b>4783 VIA PALM LAKES #111</b> <b>WEST PALM BEACH, FL 33417</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>CORRADO, RICHARD</b> <b>7119 71ST WAY</b> <b>WEST PALM Bch, FL 33407</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Corrado* DATE: 4/30/08 TELEPHONE: 561-543-5559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR