2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P95000010030

SECRET OBSESSIONS INCORPORATED

Principal Place of Business

Mailing Address

2424 N CONGRESS AVE

2424 N. CONGRESS AVE SUITE C

STE C

WEST PALM BEACH, FL 33409

WEST PALM BEACH, FL 33409

FILED Feb 03, 2006 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

01302008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0552969

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WIELAND, BEAUTRICE 1153 TRAILWAY LANE WEST PALM BEACH, FL 33417

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pillons of registered agent.	urpose of changing its registered	d office or r	egislered ageni, ör bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable BifTE Governor	danad alanah s	required when reinstating)	0.475
	वाष्ट्रान्यात्व, पुण्डच क प्रमान्य तमान्य व न्यूप्तान्य स्वयं स्वयं स्वयं साम म	application. INOTE projection	Agent signatur	s required when remataling)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.90	 Election Campaign Finance Trust Fund Contribution. 	gnic	\$5.00 May 6e Added to Fees	
10.	OFFICERS AND DIREC	TORS			1
title Name Street address City-St-Zip	P WIELAND, BEATRICE 1153 TRAILWAY LANE WEST PALM BEACH, FL 33417	:			
TITLE NAME STREET AGORESS CITY-ST-ZIP					U00800419686 02/15/06-80017-018 150.80
TISTLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
title Name Street address City-St-Lip					
TAPLE					

12. I hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the resolver 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 in changed, or on an attact plant light an againess, with all other like empowered.

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP