

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000028208

Entity Name: GRAPHICALLY SPEAKING, INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

6979 S.W. 148TH LANE
DAVIE, FL 33331 US

New Principal Place of Business:

15739 61ST PLACE NORTH
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

6979 S.W. 148TH LANE
DAVIE, FL 33331 US

New Mailing Address:

15739 61ST PLACE NORTH
LOXAHATCHEE, FL 33470 US

FEI Number: 65-0655775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'REILLY, SUZANNE
6979 SW 148TH LANE
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

O'REILLY, SUZANNE
15739 61ST PLACE NORTH
LOXAHATCHEE, FL 33470 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:

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: O'REILLY, DANIEL K
Address: 6979 SW 148TH LANE
City-St-Zip: DAVIE, FL

Title: D (X) Delete
Name: O'REILLY, SUZANNE
Address: 6979 S.W. 148TH LANE
City-St-Zip: DAVIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: O'REILLY, SUZANNE
Address: 15739 61ST PLACE NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

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: SUZANNE O'REILLY

D,P

01/25/2005

Electronic Signature of Signing Officer or Director

Date