

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000042724

FILED
Jan 16, 2005
Secretary of State

Entity Name: ADORNMENT UNLIMITED INC.

Current Principal Place of Business:

13344 GOLF CREST CIRCLE
TAMPA, FL 33624

New Principal Place of Business:

13344 GOLF CREST CIRCLE
TAMPA, FL 33618

Current Mailing Address:

13344 GOLF CREST CIRCLE
TAMPA, FL 33624

New Mailing Address:

13344 GOLF CREST CIRCLE
TAMPA, FL 33618

FEI Number: 59-3394081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, ELIZABETH F
13344 GOLF CREST CIRCLE
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

BURNS, ELIZABETH P
13344 GOLF CREST CIRCLE
TAMPA, FL 33618 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: ELIZABETH P. BURNS

01/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURNS, ELIZABETH F
Address: 13344 GOLF CREST CIRCLE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURNS, ELIZABETH F
Address: 13344 GOLF CREST CIRCLE
City-St-Zip: TAMPA, FL 33618

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: ELIZABETH P BURNS

PD

01/16/2005

Electronic Signature of Signing Officer or Director

Date