2004 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 19, 2004 8:00 am Secretary of State DOCUMENT # P96000061789 07-19-2004 90010 046 ***150.00 THANKS FOR THE MEMORIES VIDEO PRODUCTIONS. INC. Principal Place of Business Mailing Address **5090 BERKELEY DR** 4022 GREEN BLVD TAAAAIAA NAPLES, FL 34116 NAPLES, FL 34112 US 2. Principal Place of Business 3. Mailing Address P.O. BOX 0.B0 Suite, Apt. #, etc. Suite, Apt. #, etc. 07162004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0688622 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 303 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GEORGE, JOHN 5090 BERKELEY DRIVE Street Address (P.O. Box Number is Not Acceptable) NAPLES, FL 34112 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algoriture required when reinstating) 9. Election Campaign Financing FILE NOW!!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the \Box . Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE D Delete TITLE ☐ Change ☐ Addition GEORGE, JOHN NAME NAME STREET ADDRESS 5090 BERKELEY DRIVE STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34112 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition GEORGE, LORRAINE A NAME NAME STREET ADORESS 5090 BERKELEY DRIVE STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34112 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete . Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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:

FILED

Alfachment 54063435-Florida Department of State RE: Downent # P96000061789 Thanks for The Memories Violes Productions Onc. 21-8012008 104-1 On February 28, 2004 I sold the business of Quality Collision which was the D. B. A of Thanks For The Memories. The corporation of Thanks For The Memories I want to maintain. Thru an oversight I Lorgot to file the Corporate Tax due May 1,5%. Calso I was not receiving my mail from the new owners.) Enclosed is my check for \$150.00. The corporation is in place but at this time not doing any business. Thank you for your cooperation in this matter Sincerely Vom Henre