,2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 08:00 AN Secretary of State **DOCUMENT # P97000051668** DEVOTION TATTOO, INC. Principal Place of Business Mailing Address 1010 N. MILLS AVE. 1010 N. MILLS AVE. ORLANDO, FL 32803 ORLANDO, FL 32803 US No Chg-P 03282006 CR2E034 (11/05) Applied For 4. FEI Number 59-3450074 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE MCLEOD, LANCE C 1309 DRUID ISLE RD MAITLAND, FL 32751 At the state of th 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE MCLEOD, LANCE C NAME STREET ADDRESS 1309 DRUID ISLE RD CITY-ST-ZIP MAITLAND, FL 32751 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DITLE NAME STREET ADDRESS CITY-ST-ZIP

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 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

an address, with all other like empowered

SIGNATURE: