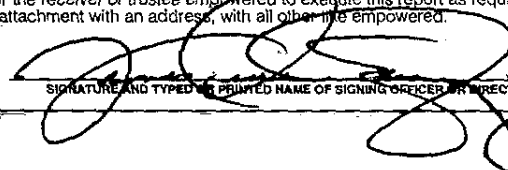


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000078270		
1. Entity Name TIPPY TOES PRO DANCE STUDIO, INC.		
Principal Place of Business 112 WISE AVE NICEVILLE, FL 32578	Mailing Address 112 WISE AVE NICEVILLE, FL 32578	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent BERRY, JAMES KEVIN 112 WISE AVENUE NICEVILLE, FL 32578		DO NOT WRITE IN THIS SPACE
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 signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BERRY, KIMBERLY GAY 112 WISE AVENUE NICEVILLE, FL 32578	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BERRY, JAMES KEVIN 112 WISE AVENUE NICEVILLE, FL 32578	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 life empowered.		
SIGNATURE: 		JAMES KEVIN BERRY 26/05 850-897-9849 Daytime Phone #



04262005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3538879

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

U00000338592
04/28/05-80043-001 150.00

**DO NOT WRITE
IN THIS SPACE**