

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110941

Entity Name: THEMEMAKERS, INC.

FILED
May 11, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 547902
ORLANDO, FL 32854

New Principal Place of Business:

4190 NORTH OBT
ORLANDO, FL 32804

Current Mailing Address:

P.O. BOX 547902
ORLANDO, FL 32854

New Mailing Address:

FEI Number: 59-3628553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HADLEY, SHARON
4545 JAMES RD.
COCOA, FL 32927 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: HADLEY, SHARON
Address: P.O. BOX 547902
City-St-Zip: ORLANDO, FL 32854

Title: CFO () Delete
Name: HILLPOT, TRAVIS W
Address: P.O. BOX 547902
City-St-Zip: ORLANDO, FL 32854

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TRAVIS HILLPOT

VP

05/11/2007

Electronic Signature of Signing Officer or Director

Date