2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110941

Entity Name: THEMEMAKERS, INC.

ORLANDO, FL 32854

City-St-Zip:

FILED Jul 14, 2008 Secretary of State

Entity Nai	ine: Impivipi	VIARERS, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
4190 NOR ORLANDO	TH OBT D, FL 32804			NORTH NEW \ ITER PARK, FL	YORK AVENUE, SUITE 201 32789	
Current Mailing Address:				New Mailing Address:		
P.O. BOX: ORLANDO	547902), FL 32854					
FEI Number:	: 59-3628553	FEI Number Applied For () FEI Number I	Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Age	nt: Nar	ne and Address	s of New Registered Agent:	
	ES RD. FL 32927 l	JS submits this statement fo	r the purpose of cha	nging its registe	ered office or registered agent, or both,	ı
SIGNATUR	RE:					
	Electro	nic Signature of Registere	ed Agent		Date	
		93(2)(b), F.S., the corporation ng Trust Fund Contribution (or notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	CEO (HADLEY, SHA P.O. BOX 547 ORLANDO, FL	902	Title: Nam Addr City-	e:	() Change () Addition	
Title: Name: Address:	CFO (HILLPOT, TRA P.O. BOX 547		Title: Nam Addr	e: SHARON	(X) Change()Addition I, HADLEY ITH NEW YORK AVENUE, SUITE 201	

City-St-Zip:

WINTER PARK, FL 32789

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: SHARON S HADLEY CEO 07/14/2008