

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S07964

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** THE VINTAGE IMAGE, INC.

**Current Principal Place of Business:**

2600 NORTH FLAGLER DRIVE  
807  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1120  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 65-0223905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POSVAR, KRISTI  
2600 NORTH FLAGLER DRIVE  
807  
WEST PALM BEACH, FL 33407 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

**OFFICERS AND DIRECTORS:**

**Title:** MS  
**Name:** POSVAR, KRISTI  
**Address:** 2600 NORTH FLAGLER DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33407

I hereby 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 all other like empowered.

**SIGNATURE:** KRISTI POSVAR

OWN

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date