

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S42933

FILED  
Feb 04, 2005  
Secretary of State

Entity Name: VIRGINIA HOFFMAN STUDIO, INC.

**Current Principal Place of Business:**

P.O. BOX 2712  
SARASOTA, FL 342302712

**New Principal Place of Business:**

2225 SIXTH ST.  
SARASOTA, FL 34237

**Current Mailing Address:**

P.O. BOX 2712  
SARASOTA, FL 342302712

**New Mailing Address:**

FEI Number: 59-3059725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEKETON, MELVIN J.  
2582 HAWTHORNE ST  
SARASOTA, FL 34239 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOFFMAN, VIRGINIA,  
Address: P.O. BOX 2712 N/A  
City-St-Zip: SARASOTA, FL 34230

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: HOFFMAN, VIRGINIA,  
Address: P.O. BOX 2712 N/A  
City-St-Zip: SARASOTA, FL 34230

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VIRGINIA HOFFMAN

PRES

02/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date