## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V58829

FILED Apr 17, 2009 Secretary of State

Entity Name: TATTOOS FOREVER, INC. **Current Principal Place of Business: New Principal Place of Business:** 210 MIRACLE STRIP PKWY FT WALTON BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 6072 BLUEBIRD LN 449 WATERWAY LANE CRESTVIEW, FL 32539 FORT WALTON BEACH, FL 32547 FEI Number: 59-3146861 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BULLARD, JEFFREY B 210 MIRACLE STRIP PKWY FT WALTON BEACH, FL 32548 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES ( ) Delete Title: () Change () Addition BULLARD, JEFFREY B Name: Name: 210 MIRACLE STRIP PKWY Address: Address: City-St-Zip: FT WALTON BEACH, FL City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: BULLARD, MARGARET C Name: 210 MIRACLE STRIP PKWY Address: Address: FT WALTON BCH, FL City-St-Zip: 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: JEFFREY B. BULLARD **PRES** 04/17/2009