

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

01 JUL -3 PM 3:47

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000005153

1. Entity Name
BONNIE BABES FOUNDATION INCORPORATED

Principal Place of Business P.O. BOX 2220 ROWVILLE, VICTORIA, 3178 AUSTRALIA	Mailing Address P.O. BOX 2220 ROWVILLE, VICTORIA, 3178 AUSTRALIA
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200004481422--4
 -07/17/01--01093--005
 *****70.00 *****70.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	4. FEI Number Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
**D'OTTAVIO, VICTORIA
 2039 SANDPIPER DRIVE
 PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME STANFIELD-PORTER, RACHEL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1 CLYNE PLACE	
CITY-ST-ZIP ROWVILLE, VICTORIA, AUSTRALIA	
TITLE NAME STANFIELD-PORTER, ALLAN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1 CLYNE PLACE	
CITY-ST-ZIP ROWVILLE, VICTORIA, AUSTRALIA	
TITLE NAME PODHORODECKI, ALFRED	<input type="checkbox"/> Delete
STREET ADDRESS 1 BLOSSOM STREET	
CITY-ST-ZIP MITCHAM, VICTORIA, AUSTRALIA	
TITLE NAME COSGROVE, PAUL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 8 BANJORA CLOSE	
CITY-ST-ZIP CROYDON HILLS, VIC, AUSTRALIA	
TITLE NAME PRESTWICH, TREVOR	<input type="checkbox"/> Delete
STREET ADDRESS 11 LONSDALE STREET	
CITY-ST-ZIP ROWVILLE, VICTORIA, AUSTRALIA	
TITLE NAME PATERSON, DEBBIE	<input type="checkbox"/> Delete
STREET ADDRESS 53 MELISSA STREET	
CITY-ST-ZIP DONVALE VIC AUSTRALIA	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ANN SWEENEY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 17, CANTERBURY ST...	
CITY-ST-ZIP CARLEIGH, VICTORIA, AUSTRALIA	
TITLE NAME DIANE McCREAL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS PO Box 1155	
CITY-ST-ZIP FRANKSTON, VICTORIA, AUSTRALIA	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

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