

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000007104

Entity Name: BOCASS, INC.

FILED
Nov 02, 2005
Secretary of State

Current Principal Place of Business:

315 SE MIZNER BLVD
STE 207
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

65 SE 5TH AVE STE G
DELRAY BCH, FL 33483

New Mailing Address:

FEI Number: 05-0552595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSON, MICHAEL A
65 SE 5TH AVE G
DELRAY BCH, FL 33483 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: D () Delete
Name: CASSON, MICHAEL A
Address: 65 SE 5TH AVE STE G
City-St-Zip: DELRAY BCH, FL 33483

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: CASSON, CHARLOTTE F
Address: 65 SE 5TH AVE ST G
City-St-Zip: DELRAY BEACH, FL 33483

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: MICHAEL CASSON

D

11/02/2005

Electronic Signature of Signing Officer or Director

Date