


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90506 012 ***150.00

DOCUMENT # P03000076516
1. Entity Name
Bamboo Inn, Inc.



40077133

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
14351 West Dixie Hwy
Suite, Apt. #, etc.

3. Mailing Address
PO Box 592512
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number 20-0086127 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

Zip 33161 Country Miami-Dade Zip 33159 Country Miami-Dade

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Mimbela Sonia

Street Address (P.O. Box Number is Not Acceptable)
14351 West Dixie Hwy

City Miami, FL Zip Code 33161

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Mimbela DATE 03/26/05

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

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mimbela Sonia / President 14351 West Dixie Hwy Miami, FL 33161	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Mimbela DATE 03/26/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)