

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042073

Entity Name: BOUNCE AROUND, INC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

14607 SW 104TH STREET
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

22422 SW 184 AVENUE
MIAMI, FL 33170

New Mailing Address:

FEI Number: 32-0110555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DWYER, NICOLE
22422 SOUTHWEST 184 AVENUE
MIAMI, FL 33170 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DWYER, THOMAS
Address: 22422 SW 184 AVENUE
City-St-Zip: MIAMI, FL 33170 US

Title: VP () Delete
Name: DWYER, NICOLE
Address: 22422 SW 184 AVENUE
City-St-Zip: MIAMI, FL 33170 US

Title: T () Delete
Name: DWYER, THOMAS
Address: 22422 SW 184 AVENUE
City-St-Zip: MIAMI, FL 33170 US

Title: S () Delete
Name: DWYER, NICOLE
Address: 22422 SW 184 AVENUE
City-St-Zip: MIAMI, FL 33170 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: NICOLE DWYER

VP

07/08/2008

Electronic Signature of Signing Officer or Director

_____ Date