2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2006
Secretary of State

DOCUMENT# P05000050157

Entity Name: BE A DREAMER ENTERPRISES, INC.

Current Principal Place of Business:

526 MORREL AVENUE
LAKE WALES, FL 33859

New Principal Place of Business:

Current Mailing Address:

526 MORREL AVENUE
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FONTAINE, RENEE
526 MORREL AVENUE
LAKE WALES, FL 33859 US

Name and Address of New Registered Agent:

FONTAINE-COLE, RENEE
526 MORREL AVENUE
LAKE WALES, FL 33859 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: RENEE FONTAINE-COLE 06/30/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: COLE, MARK
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

Title: VP/D ( ) Delete
Name: FONTAINE, RENEE
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

Title: T ( ) Delete
Name: COLE, MARK
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

Title: S ( ) Delete
Name: FONTAINE, RENEE
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP/D (X) Change ( ) Addition
Name: FONTAINE-COLE, RENEE
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

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

Title: S (X) Change ( ) Addition
Name: FONTAINE-COLE, RENEE
Address: 526 MORREL AVENUE
City-St-Zip: LAKE WALES, FL 33859

I hereby certify that the information supplied with this filing does not qualify for the 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: RENEE F. COLE VP/D 06/30/2006
Electronic Signature of Signing Officer or Director Date