2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P98000077768

Entity Name: BADGE EXPRESS, INC.

Current Principal Place of Business:

5747 N. ANDREWS AVE
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

5775 N. ANDREWS AVE
FORT LAUDERDALE, FL 33309

Current Mailing Address:

5747 N. ANDREWS AVE
FORT LAUDERDALE, FL 33309

New Mailing Address:

5775 N. ANDREWS AVE
FORT LAUDERDALE, FL 33309

FEI Number: 65-0870392 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UDELL, MICHAEL B ESQ
5400 S UNIVERSITY DR., #117
DAVIE, FL 33328 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NEWMAN, ROBERT
Address: 5747 N ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V ( ) Delete
Name: PASQUARELLO, JAMES
Address: 5747 N ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: NEWMAN, ROBERT
Address: 5775 N ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V (X) Change ( ) Addition
Name: PASQUARELLO, JAMES
Address: 5775 N ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

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: RN P 04/29/2005

Electronic Signature of Signing Officer or Director Date