2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299975

Title:

Name:

Address:

City-St-Zip:

FILED Mar 28, 2006 Secretary of State

Entity Nan	ne: BUGSENT	ERPRISES INC				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
16283 NW HOLLYWO	14 CT OD, FL 33028	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
16283 NW HOLLYWO	14 CT OD, FL 33028	US				
FEI Number:	59-1110575	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
ALLEN, JAI 16283 NW HOLLYWO		US				
The above in the State		bmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR						
Election Carr		Signature of Registered Agen rust Fund Contribution ().	t	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () D ALLEN, JAMES N 18283 NW 14 CT HOLLYWOOD, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V () D ALLEN, KENNETH 615 N.E. 163 STR MIAMI, FL 33162	IM EEET	Title: Name: Address: City-St-Zip:	V (X) Change () Addition ALLEN, RUTH M 615 N.E. 163 STREET MIAMI, FL 33162		
Title: Name: Address: City-St-Zip:	ST (X) D ALLEN, RUTH M 615 N.E. 163 STR MIAMI, FL 33162	EET	Title: Name: Address: City-St-Zip:	() Change () Addition		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES ALLEN Ρ 03/28/2006

() Delete

ALLEN, DANIÈLLE D

MIAMI, FL 33179 US

1950 N.E. 207 STREET

(X) Change () Addition

ALLEN, DANIÈLLE D

HOLLYWOOD, FL 33028 US

18283 NW 14 CT