

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Feb 13, 2008  
Secretary of State**

DOCUMENT# 504485

Entity Name: THE BEAN, INC.

**Current Principal Place of Business:**

1547 FLORIDA MANGO RD., N.  
BLDG 11, UNIT 2  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

1547 FLORIDA MANGO RD., N.  
BLDG 11, UNIT 3  
WEST PALM BEACH, FL 33409 US

**Current Mailing Address:**

P O BOX 15454  
WEST PALM BEACH, FL 33416 US

**New Mailing Address:**

FEI Number: 59-1675648      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOORE, JAMES B  
1547 FLORIDA MANGO RD NO  
BLDG 11-2  
WEST PALM BEACH, FL 33409 US

**Name and Address of New Registered Agent:**

COATES, JOSEPH C III  
1547 FLORIDA MANGO RD NO  
BLDG 11-3  
WEST PALM BEACH, FL 33409 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: COATES, JOSEPH C., III      02/13/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PDT ( ) Delete  
Name: MOORE, JAMES B  
Address: PO BOX 15454  
City-St-Zip: WEST PALM BCH, FL 33416

Title: S ( ) Delete  
Name: MOORE, EILEEN B  
Address: PO BOX 15454  
City-St-Zip: WEST PALM BEACH, FL 33416

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDT (X) Change ( ) Addition  
Name: MOORE, EILEEN B  
Address: PO BOX 15454  
City-St-Zip: WEST PALM BCH, FL 33416

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: MOORE, EILEEN B.      PDT      02/13/2008  
Electronic Signature of Signing Officer or Director      Date