

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000804

Entity Name: BOUNCYNET, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

11401 NW 12 STREET #124
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

11401 NW 12 STREET #124
MAIMI, FL 33172

New Mailing Address:

FEI Number: 65-0982893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYER, ENRIQUE A
2512 MONTCLAIRE CIRCLE
WESTON, FL 33326 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: PCD () Delete
Name: MAYER, ENRIQUE A
Address: 200 E BROWARD BLVD, SUITE 1920
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VD () Delete
Name: VELASCO, JORGE T
Address: 200 E BROWARD BLVD, SUITE 1920
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D (X) Delete
Name: LIFF, NICOLE
Address: 200 E BROWARD BLVD, SUITE 1920
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T (X) Delete
Name: VCRRATH, GUILLERMO
Address: 200 E. BROWARD BLVD STE.,#1920
City-St-Zip: FORT LAUDERDALE, FL 33301

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: ENRIQUE ALTAMIRANO

PCD

04/30/2008

Electronic Signature of Signing Officer or Director

Date