

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90053 019 ***150.00

DOCUMENT # F01000003521

1. Entity Name
BAMBOO CLUB, INC.



Principal Place of Business
**5050 NORTH 40TH STREET, #200
 PHOENIX, AZ 85018**

Mailing Address
**5050 NORTH 40TH STREET, #200
 PHOENIX, AZ 85018**

50007263



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01112005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent
**NRAI SERVICES, INC.
 526 E. PARK AVE.
 TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SHRADER, WILLIAM G	
STREET ADDRESS	5050 N 40TH STREET STE 200	
CITY-ST-ZIP	PHOENIX, AZ 85018	
TITLE	CEOD	<input checked="" type="checkbox"/> Delete
NAME	BROWN, BART A JR.	
STREET ADDRESS	5050 N 40TH STREET STE 200	
CITY-ST-ZIP	PHOENIX, AZ 85018	
TITLE	VPSD	<input type="checkbox"/> Delete
NAME	HERRON, MICHAEL J	
STREET ADDRESS	5050 N 40TH STREET STE 200	
CITY-ST-ZIP	PHOENIX, AZ 85018	
TITLE	CFOT	<input type="checkbox"/> Delete
NAME	GARNREITER, MICHAEL	
STREET ADDRESS	5050 N 40TH STREET STE 200	
CITY-ST-ZIP	PHOENIX, AZ 85018	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO - Director - President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHADER WILLIAM G.	
STREET ADDRESS	5050 N. 40th St, Ste 200	
CITY-ST-ZIP	PHOENIX, AZ 85018	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael J. Herron **Michael J. Herron** 01-24-05 602-852-9082
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Davano Phone #