

FILED
Jul 18, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F02000001503		
1. Entity Name BAYOU INVESTMENT CORPORATION		
Principal Place of Business C/O BANK OF BUTTERFIELD (BAHAMAS) LTD. MONTAGUE STERLING CENTRE, 3F BAHAMAS,		Mailing Address C/O BANK OF HAWAII IPB-274 111 S KING STREET HONOLULU, HA 96813
DO NOT WRITE IN THIS SPACE		
		07112006 No Chg-P CR2E034 (11/05)
4. FEI Number 98-0219218		Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed in printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when renouncing)		
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD STERLING EAST LTD. MONTAGUE STERLING CENTRE, EAST BAY ST. NASSAU, BAHAMAS.	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MONTAGUE EAST LTD. MONTAGUE STERLING CENTRE, EAST BAY ST. NASSAU, BAHAMAS.	
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 the empowered.		
SIGNATURE: <u><i>Deita McIntire</i></u> <u>14 JUL 06</u> (242) 677-8601 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deputa Photo 1		