2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# F22735

Entity Name: BABE'S BILLIARDS, INC.

Current Principal Place of Business:

5205 S. INDIAN RIVER DRIVE
FT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

5205 S. INDIAN RIVER DRIVE
FT PIERCE, FL 34982

New Mailing Address:

FEI Number: 59-2096021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MINARDI, JOSEPH JR
5205 S. INDIAN RIVER DRIVE
FT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

MINARDI, JOSEPH A JR.
5205 S. INDIAN RIVER DRIVE
FT PIERCE, FL 34982 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: JOSEPH A MINARDI, JR. 05/01/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MINARDI, JOSEPH A JR,
Address: 5205 S. INDIAN RIVER DRIVE
City-St-Zip: FT PIERCE, FL 34982 US

Title: DVS ( ) Delete
Name: MINARDI, MERRILY,
Address: 5205 S. INDIAN RIVER DRIVE
City-St-Zip: FT PIERCE, FL 34982 US

Title: T ( ) Delete
Name: MINARDI, MERRILY,
Address: 5205 S. INDIAN RIVER DRIVE
City-St-Zip: FT PIERCE, FL 34982 US

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:

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.

SIGNATURE: MERRILY MINARDI T 05/01/2006
Electronic Signature of Signing Officer or Director Date