## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G04217

24 LAKEWOOD ST

MARY ESTHER, FL

Address:

City-St-Zip:

Entity Name: BALLOON WORKS, INCORPORATED

FILED Jan 12, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 323 PAGE BACON ROAD #7 24 LAKEWOOD ST MARY ESTHER, FL 32569 MARY ESTHER, FL 32569 **Current Mailing Address: New Mailing Address:** 323 PAGE BACON ROAD #7 24 LAKEWOOD ST MARY ESTHER, FL 32569 MARY ESTHER, FL 32569 FEI Number: 59-2235691 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRUCE, MARY ANN 24 LAKÉWOOD ST MARY ESTHER, FL 32569 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CRUCE, MARY ANN, Name: Name: 24 LAKEWOOD ST Address: Address: City-St-Zip: MARY ESTHER, FL City-St-Zip: Title: PD Title: () Change () Addition () Delete CRUCE, HOWARD. Name: 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 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 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: HOWARD CRUCE PRES 01/12/2005