2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047482

Entity Name: A BOUNCY PARTY, LLC

432 ORIOLE CIRCLE

JUPITER, FL 33458

Address:

City-St-Zip:

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 432 ORIOLE CIRCLE JUPITER, FL 33458 **Current Mailing Address: New Mailing Address:** 432 ORIOLE CIRCLE JUPITER, FL 33458 FEI Number: 04-3780312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. ROJAS, JOHN A 1840 SW 22ND ST. 432 ORIOLE CIRCLE 4TH FLOOR JUPITER, FL 33458 US MIAMI, FL 33145 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: JOHN A. ROJAS 05/03/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete ROJAS, KIMBERELEY A Name: Name: Address: 432 ORIOLE CIRCLE Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ROJAS, JOHN A Name: Address: 432 ORIOLE CIRCLE Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: () Delete Title: () Change () Addition ROJAS, JOHN A Name: Name: 432 ORIOLE CIRCLE Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ROJAS, KIMBERELEY A Name:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: JOHN A. ROJAS T 05/03/2005