2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M30858

FILED Feb 19, 2008 Secretary of State

Entity Name: SOUTHERN BALLOON DISTRIBUTORS, INC.

Current Principal Place of Business:			New Principal Place of Business:			
12217 SW MIAMI, FL						
Current Mailing Address:			New Mailing Address:			
12217 SW MIAMI, FL						
El Number	: 59-2816418	FEI Number Applied For ()	FEI Number Not Applie	cable ()	Certificate of Status	Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Ag	ent:
MARTIN, Y 12271 SW MIAMI, FL						
The above n the Stat	e named entity s e of Florida.	submits this statement for the	purpose of changing its	s registered	office or registered a	gent, or both,
The above n the Stat SIGNATU	e of Florida. RE:			s registered		gent, or both,
n the Stat	e of Florida. RE: Electron	ic Signature of Registered A		s registered	office or registered a	gent, or both,
n the State	e of Florida. RE: Electron mpaign Financing	ic Signature of Registered Ag	gent		Date	
n the State	e of Florida. RE: Electron	ic Signature of Registered Ag	gent			
n the State	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete NIA CT	gent	S/CHANGES	Date	
n the Stati BIGNATU Election Cal DFFICER Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIREC PS () MARTIN, VIRGI 12217 SW 132 MIAMI, FL 331	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete NIA CT 86 US Delete NIA CT NIA CT OT CT	gent ADDITIONS Title: Name: Address:	S/CHANGES	Date S TO OFFICERS AN) Change () Addition X) Change () Addition ZABETH N 2 CT	

I hereby certify that the information supplied with this filing does not qualify 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: VIRGINIA E. MARTIN PRES 02/19/2008