

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004017

FILED
Jul 07, 2005
Secretary of State

Entity Name: SUGARBASH, INC.

Current Principal Place of Business:

401 NIBLICK AVE
5
ORLANDO, FL 32804

New Principal Place of Business:

1020 RIDGE POINTE COVE
LONGWOOD, FL 32750

Current Mailing Address:

8548 SHADY GLEN DRIVE
ORLANDO, FL 32819 US

New Mailing Address:

931 N. STATE RD. 434
SUITE 1201-343
ALTAMONTE SPRINGS, FL 32714

FEI Number: 41-2094936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JEFFREYS, SANDI
8548 SHADY GLEN DRIVE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LUNA, STACY
Address: 1359 LONGHILL DRIVE
City-St-Zip: APOKA, FL 32712

Title: T () Delete
Name: JEFFREYS, SANDI
Address: 8548 SHADY GLEN DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: S () Delete
Name: DALEY, MICHELLE
Address: 15935 SAUSALITO CIRCLE
City-St-Zip: CLERMONT, FL 347119690

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUNA, STACY
Address: 1020 RIDGE POINTE COVE
City-St-Zip: LONGWOOD, FL 32750

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JAY, SUJANSKY
Address: 679 OLEAN COURT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP () Change (X) Addition
Name: SCOTT, SILEN
Address: 501 N. ORLANDO AVENUE, SUITE 313
City-St-Zip: WINTER PARK, FL 32789

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDI JEFFREYS

T

07/07/2005

Electronic Signature of Signing Officer or Director

Date