2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001036

Entity Name: BOTTLE BABIES R-US INC.

FILED Aug 31, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

543 53RD ST. SOUTH 2700 40TH AVENUE NORTH ST. PETERSBURG, FL 33707 ST. PETERSBURG, FL 33714

Current Mailing Address: New Mailing Address:

543 53RD ST. SOUTH 2700 40TH AVENUE NORTH ST. PETERSBURG, FL 33707 ST. PETERSBURG, FL 33714

FEI Number: 36-4602472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

MOLL, CYNTHIA D
1900 44 STREET SOUTH
ST. PETERSBURG, FL 33707 US

MOLL, CYNTHIA D
1900 44 STREET SOUTH
ST. PETERSBURG, FL 33707 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: CYNTHIA D MOLL 08/31/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 BAKER, ASHLEY
 Name:
 WADE, KENNETH A

 Address:
 4917 10TH AVENUE SO.
 Address:
 2700 40TH AVENUE NORTH

 City-St-Zip:
 GULFPORT, FL 33707
 City-St-Zip:
 ST.PETERSBURG, FL 33714

Title: D () Delete Title: D (X) Change () Addition Name: CHENEVERT, DODIE Name: EAST, JOYCE A

Address: 3506 51ST AVENUE NO. Address: 2625 MIRIAM STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33713 City-St-Zip: GULFPORT, FL 33711

Title: D () Delete Title: D (X) Change () Addition Name: WADE, KENNETH Name: BEUDET, HELEN

Address: 2612 MIRIAM STREET SO. Address: 2612 MIRIAM STREET SO. City-St-Zip: GULFPORT, FL 33711 City-St-Zip: GULFPORT, FL 33711

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

SIGNATURE: KENNETH A WADE D 08/31/2008