

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90269 026 \*\*\*150.00

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

|  |                                       |   |   |   |  |
|--|---------------------------------------|---|---|---|--|
| <b>DOCUMENT # P00000038592</b><br>1. Entity Name<br><b>B-SAY, INC.</b>   |                                       |   |   |   |  |
| Principal Place of Business<br><b>611 WEST AZEELE STREET<br/>         TAMPA, FL 33606</b>  |                                       |   | Mailing Address<br><b>611 WEST AZEELE STREET<br/>         TAMPA, FL 33606</b>   |   |  |
| 2. Principal Place of Business<br><b>2003 E. Waters Ave</b><br><small>Suite, Apt. #, etc.</small>  |                                       | 3. Mailing Address<br><b>2003 E. Waters Ave</b><br><small>Suite, Apt. #, etc.</small> |   |   |  |
| City & State<br><b>Tampa, FL</b>   |                                       | City & State<br><b>Tampa, FL</b>  |   | 4. FEI Number<br><b>59-3639753</b>  |  |
| Zip<br><b>33604</b>  |                                       | Country<br><b>USA</b>   |   | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required |  |
| 6. Name and Address of Current Registered Agent<br><br><b>H. STRATTON SMITH, III<br/>         611 WEST AZEELE STREET<br/>         TAMPA, FL 33606</b>  |                                       |   | 7. Name and Address of New Registered Agent<br>Name<br><b>Abdesselem Benslama</b><br>Street Address (R.O. Box Number is Not Acceptable)<br><b>2003 E. Waters Ave</b><br>City<br><b>Tampa</b> FL      Zip Code<br><b>33604</b> |   |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE <u><i>A. Benslama</i></u> <b>Abdesselem Benslama</b> <u>3/13/06</u> DATE  |                                       |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>         After May 1, 2006 Fee will be \$550.00</b>   |                                       |   | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees   |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |                                       |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |   |  |
| TITLE<br><b>PD</b>   | NAME<br><b>BENSLAMA, ABDESSELAM</b>   |   | TITLE<br><b>Benslama, Abdesselem</b>  | NAME<br><b>2003 E. Waters Ave</b>   |  |
| STREET ADDRESS<br><b>611 WEST AZEELE STREET</b>  | CITY-ST-ZIP<br><b>TAMPA, FL 33606</b> |   | STREET ADDRESS<br><b>2003 E. Waters Ave</b>   | CITY-ST-ZIP<br><b>Tampa, FL 33604</b>   |  |
| <input type="checkbox"/> Delete  |                                       |   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  |   |  |
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| <input type="checkbox"/> Delete  |                                       |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for two exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                       |   |   |   |  |
| SIGNATURE: <u><i>A. Benslama</i></u> <b>Abdesselem Benslama</b> <u>3/13/06</u>   |                                       |   |   |   |  |

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03092006 Chg-P CR2E034 (11/05)



ATTACHMENT

50005651

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 17, 2006

B-SAY, INC.  
2003 E. WATERS AVE  
TAMPA, FL 33604

Subject: B-SAY, INC.

Reference Number: P00000038592

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cd

ANNUAL REPORTS SECTION