2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045831

Entity Name: BUG OUT PRO, INC.

FILED Feb 21, 2011 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|---|--|---|--|
| 6240 W. FALCON LEA DI DAVIE, FL 33331 | ₹. | | |
| Current Mailing Address: | | New Mailing Address: | |
| P.O. BOX 290642 FT LAUDERDALE, FL 33 | 329 | | |
| FEI Number: 65-1007752 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| COLLIGAN, TODD R 6240 W. FALCON LEA DI DAVIE, FL 33331 US | ₹. | | |
| The above named entity s in the State of Florida. | ubmits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, |
| SIGNATURE: | | | |
| SIGNATORE. | Electronic Signature of Registered Agent | | |

OFFICERS AND DIRECTORS:

Title:

Name: COLLIGAN, TODD R Address: 6240 W. FALCON LEA DR. City-St-Zip: DAVIE, FL 33331

I hereby 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 all other like empowered.

SIGNATURE: TODD COLLIGAN OWN 02/21/2011