

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000095231

FILED
Apr 28, 2004
Secretary of State

Entity Name: BALLOON & BALLOONS, INC.

Current Principal Place of Business:

15540 SW 80 ST.
STE 103
MIAMI, FL 33193

New Principal Place of Business:

8290 LAKE DR.
131
MIAMI, FL 33166

Current Mailing Address:

15540 SW 80 ST.
STE 103
MIAMI, FL 33193

New Mailing Address:

8290 LAKE DR.
STE 131
MIAMI, FL 33166

FEI Number: 59-1839119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, FERNANDO
16300 NE 19 AVE.
SUITE 100
NORTH MIAMI BEACH, FL 33162 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARDO, JUAN PABLO
Address: 6340 SW 79 ST. STE 24
City-St-Zip: MIAMI, FL 33143

Title: VP () Delete
Name: PORDO, HERNANDO
Address: 15540 SW 80 ST., STE 103
City-St-Zip: MIAMI, FL 33193

Title: VPD (X) Delete
Name: PARDO, HERNANDO
Address: 7390 SW 107 AVE. #2303
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARDO, HERNANDO
Address: 8290 LAKE DR.
City-St-Zip: MIAMI, FL 33166

Title: VP (X) Change () Addition
Name: RODRIGUEZ, AHIRAM
Address: 8290 LAKE DR.
City-St-Zip: MIAMI, FL 33166

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

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

SIGNATURE: HERNANDO PARDO

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date