

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040862

Entity Name: BADA BOINK, INC.

FILED
Jan 18, 2007
Secretary of State

Current Principal Place of Business:

20320 GRANDE OAK SHOPPES BLVD.
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

5215 OLD GALLOWS WAY
NAPLES, FL 34105

New Mailing Address:

FEI Number: 30-0054530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

D'AGOSTINO, LOUIS D
821 FIFTH AVENUE SOUTH, STE 201
NAPLES, FL 34102 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: CEO () Delete
Name: D'AGOSTINO, FRANK
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

Title: P () Delete
Name: D'AGOSTINO, DOMENIC
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

Title: VP () Delete
Name: D'AGOSTINO, JOHN
Address: 7834 GARDNER DR #89
City-St-Zip: NAPLES, FL 34109

Title: T () Delete
Name: D'AGOSTINO, MARIO
Address: 2215 HAWKS RIDGE DR #803
City-St-Zip: NAPLES, FL 34105

Title: S () Delete
Name: D'AGOSTINO, ANNE
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: D'AGOSTINO, JOHN
Address: 7834 GARDNER DR #201
City-St-Zip: NAPLES, FL 34109

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

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

SIGNATURE: ANNE D'AGOSTINO

S

01/18/2007

Electronic Signature of Signing Officer or Director

Date