

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000041975

FILED
Apr 25, 2003
Secretary of State

Entity Name: BARGODS, INC.

Current Principal Place of Business:

11762 N KENDALL DRIVE, #141
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11762 N KENDALL DRIVE, #141
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-1097671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGAN, GARETT
11762 N. KENDALL DRIVE, #141
MIAMI, FL 33186 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: CDT () Delete
Name: SMITH, JASON T
Address: 8341 SW 107 AVE STE C
City-St-Zip: MIAMI, FL 33173

Title: DPS () Delete
Name: HAGAN, GARETT W
Address: 8339 SW 107 AVE STE B
City-St-Zip: MIAMI, FL 33173

Title: DV () Delete
Name: ALFONSO, ENIVALDO
Address: 12950 SW 107 TERR
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: DIAZ, FREDDY
Address: 51 PEN-NA-NA DR
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JASON SMITH

CDT

04/25/2003

Electronic Signature of Signing Officer or Director

Date