

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044398

FILED
Mar 01, 2006
Secretary of State

Entity Name: BALLOON DECORATING SPECIALISTS, INC.

Current Principal Place of Business:

101 CENTURY 21 DR.
SUITE 109
JACKSONVILLE, FL 32216

New Principal Place of Business:

8509 ALTON AVE.
JACKSONVILLE, FL 32211

Current Mailing Address:

11755 FT. CAROLINE ROAD
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3715153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, BILLIE ANN
11755 FT. CAROLINE ROAD
JACKSONVILLE, FL 32225 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: D () Delete
Name: TURNER, BILLIE ANN
Address: 11755 FT. CAROLINE ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: TURNER, EDWIN EARL JR.
Address: 11755 FT. CAROLINE ROAD
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BILLIE ANN TURNER

D

03/01/2006

Electronic Signature of Signing Officer or Director

Date