

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000109850

Entity Name: BELLABUCCI INNOVATIONS, INC.

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

20 S BROAD STREET  
BROOKSVILLE, FL 34601

## New Principal Place of Business:

3069 BROOKFIELD LN  
CLEARWATER, FL 33761 US

## Current Mailing Address:

20 S BROAD STREET  
BROOKSVILLE, FL 34601

## New Mailing Address:

3069 BROOKFIELD LN  
CLEARWATER, FL 33761

FEI Number: 59-3756370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA & OFFSHORE BUSINESS FORMATION, INC  
20 S BROAD STREET  
BROOKSVILLE, FL 34601 US

## Name and Address of New Registered Agent:

BUCCELLATO, MICHELE  
3069 BROOKFIELD LN  
CLEARWATER, FL 33761 US

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: MICHELE BUCCELLATO

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUCCELLATO, MICHELE  
Address: 20 S BROAD STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BUCCELLATO, MICHELE  
Address: 3069 BROOKFIELD LN  
City-St-Zip: CLEARWATER, FL 33761 US

Title: VPD ( ) Change (X) Addition  
Name: LAMBERT IV, ALBERT E  
Address: 3069 BROOKFIELD LN  
City-St-Zip: CLEARWATER, FL 33761 US

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: MICHELE BUCCELLATO

PRES

04/17/2006

Electronic Signature of Signing Officer or Director

Date