


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000021066 1. Entity Name B-DAZZLE CORPORATION						FILED 05 JUL 21 AM 11:39 ALLAHUSSE, FLORIDA	
Principal Place of Business 19611 SW 134TH COURT MIAMI, FL 33177-4136				Mailing Address 19611 SW 134TH COURT MIAMI, FL 33177-4136			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent BROADWAY, LOIS 14831 SW 103RD PLACE MIAMI, FL 33176				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BROWN, VERONICA <input type="checkbox"/> Delete 10241 SW 152ND STREET MIAMI, FL 33157			TITLE NAME STREET ADDRESS CITY - ST - ZIP	07/25/05--01081--024 <input type="checkbox"/> Change <input type="checkbox"/> Addition \$150.00		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V <input type="checkbox"/> Delete BROWN, DARRYL 10241 SW 152ND STREET MIAMI, FL 33157			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: VERONICA BROWN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				7/14/05 <small>Date</small>			
				<small>Daytime Phone #</small> M/10			

To Whom it may concern

I Veronica Brown have received your letter. Due to a new mail carrier on our route the mail had been placed to another residences mail box. This homeowner lives on street and my residence is on Avenue. If you can please omit the fees because of this matter.

I thank you very much for your consideration.

Thank You Veronica Brown
President of B.Nazke