

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000036860

Entity Name: ZADIGGLE, INC.

FILED  
Jan 24, 2005  
Secretary of State

## Current Principal Place of Business:

21440 DRANSON AVE  
PORT CHARTLOTTE, FL 33952

## New Principal Place of Business:

22181 RIVERHEAD AVE  
PORT CHARTLOTTE, FL 33952

## Current Mailing Address:

PO BOX 380321  
MURDOCK, FL 33938

## New Mailing Address:

FEI Number: 55-0791269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FIGUEREDO, MARK  
21440 DRANSON AVE  
PORT CHARTLOTTE, FL 33952 US

## Name and Address of New Registered Agent:

FIGUEREDO, MARK  
22181 RIVERHEAD AVE  
PORT CHARTLOTTE, FL 33952 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: /MAF/

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FIGUEREDO, MARK  
Address: 21440 DRANSON AVE  
City-St-Zip: PORT CHARTLOTTE, FL 33952

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FIGUEREDO, MARK  
Address: 22181 RIVERHEAD AVE  
City-St-Zip: PORT CHARTLOTTE, FL 33952

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: MARK ANTHONY FIGUEREDO

P

01/24/2005

Electronic Signature of Signing Officer or Director

Date