

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000016100

Entity Name: IXOYE ADVENTURES, INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

4959 N. UNIVERSITY DRIVE
#19
LAUDERHILL, FL 33351

New Principal Place of Business:

Current Mailing Address:

4959 N. UNIVERSITY DRIVE
#19
LAUDERHILL, FL 33351

New Mailing Address:

FEI Number: 41-2079087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORNATORE, WILLIAM P II
4959 N. UNIVERSITY DRIVE
19
LAUDERHILL, FL 33351 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LAGASSE, SEAN M SR
Address: 5255 NW 52ND ST
City-St-Zip: COCONUT CREEK, FL 33073 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: LAGASSE, MARIA D
Address: 5255 NW 52 STREET
City-St-Zip: COCONUT CREEK, FL 33073 US

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: SEAN LAGASSE' SR.

PRES

01/25/2005

Electronic Signature of Signing Officer or Director

Date