2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 29, 2007 08:00 AM Secretary of State

			* <u>-10' 1</u>				
DOCUMENT # P03000043690 1. Entity Name BABALON PROPERTY MANAGEMENT, INC.			Secretary of State				
Principal Place of Business 501 BRINY AVENUE PALM BEACH, FL 33062 US Mailing Address 501 BRINY AVENUE PALM BEACH, FL 33062 US			js				
D	O NOT WRITE	CE	01042007 4. FEI Number NOT API	No Chg-P	CR2E034 (11/0	5) Applied For Not Applicable	
	6. Name and Address of Current Re	distered Agent	- H-s - :	5. Certificate of	of Status Desired	\$8.75 Fee Requ	Additional ulred
COREA, MICHAEL 501 BRINY AVENUE PALM BEACH, FL 33062			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for ti ions of registered agent.	ne purpose of changing its register	red office or register	ed agent, or both	, in the State of Flo	rida. I am familiar w	ith, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and	ithe if applicable (NOTE Registers	ed Agent signature required	swhen reinstating)	###	DATE	
FIL After Ma	E NOW!!! TEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution	+-	.00 May Be			
10.	OFFIÇERS AND DI	RECTORS		<u>. </u>			
title name street address city-st-zip	PT COREA, MICHAEL 501 BRINY AVENUE POMPANO BEACH, FL 33062	, w			U000 02/01/0)00609284)7-80045-00)6 15 0. 00
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u>			-	NOT W	=	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN T	THIS SF	PACE	
TITLE NAME STREET ADDRESS CRY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. I hereby certify that the Information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reported 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 of the receiver of truster employered 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 a fall tract my name appears in Block 10 or Block 11 if changed, or on a fall tract my name appears in Block 10 or Block 11 if changed.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: