

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070466

FILED
Apr 20, 2004
Secretary of State

Entity Name: BUFF YOU, INC.

Current Principal Place of Business:

5801 S.W. 24TH AVE.
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

4043 SW 49TH COURT
FORT LAUDERDALE, FL 33314

Current Mailing Address:

5801 S.W. 24TH AVE.
FORT LAUDERDALE, FL 33312

New Mailing Address:

4043 SW 49TH COURT
FORT LAUDERDALE, FL 33314

FEI Number: 05-0575554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOMBARDO, PATRICIA H
5801 S.W. 24TH AVE.
FORT LAUDERDALE, FL 33312

Name and Address of New Registered Agent:

LOMBARDO, PATRICIA H
4043 SW 49TH COURT
FORT LAUDERDALE, FL 33314

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: PATRICIA H. LOMBARDO

04/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOMBARDO, PATRICIA H
Address: 5801 S.W. 24TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: V () Delete
Name: DUBREILO, CHRISTINA N
Address: 5801 S.W. 24TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S () Delete
Name: DUBREULL, TRACY L
Address: 5801 S.W. 24TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOMBARDO, PATRICIA H
Address: 4043 SW 49TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: V (X) Change () Addition
Name: DUBREUIL, CHRISTINA R
Address: 4043 SW 49TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: S (X) Change () Addition
Name: DUBREUIL, TRACY L
Address: 4043 SW 49TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33314

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: PATRICIA H. LOMBARDO

P

04/20/2004

Electronic Signature of Signing Officer or Director

Date