

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080649

Entity Name: TOUT BAGAY INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

545 NE 121 ST. #305
NORTH MIAMI, FL 33161

Current Mailing Address:

545 NE 121 ST. #305
NORTH MIAMI, FL 33161

New Principal Place of Business:

8325 N.E. 2ND. AVENUE
100
MIAMI, FL 33138

New Mailing Address:

8325 N.E. 2ND. AVENUE
100
MIAMI, FL 33138

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN, ALIX
545 NE 121 ST. #305
NORTH MIAMI, FL 33161

Name and Address of New Registered Agent:

FILS-AIME, WILBERT
1951 N.E. 167 STREET
19
NORTH MIAMI BEACH, FL 33162

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: WILBERT FILS-AIME

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: JEAN, ALIX
Address: 545 NE 121 ST. #305
City-St-Zip: NORTH MIAMI, FL 33161

Title: P () Delete
Name: FILS-AIME, WILBERT
Address: 1951 NE 167TH ST.L #19
City-St-Zip: NORTH MIAMI, FL 33162

Title: ST () Delete
Name: SEME, KATIA
Address: 545 NE 121 ST. #305
City-St-Zip: NORTH MIAMI, FL 33161

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: JEAN, ALIX
Address: 13000 GRIFFING BLVD
City-St-Zip: NORTH MIAMI, FL 33161

Title: PRES (X) Change () Addition
Name: FILS-AIME, WILBERT
Address: 1951 NE 167TH ST.L #19
City-St-Zip: NORTH MIAMI, FL 33162

Title: V-PR (X) Change () Addition
Name: ERNEST, SIMON
Address: 8325 N.E. 2ND. AVENUE
City-St-Zip: MIAMI, FL 33138

Title: SECR () Change (X) Addition
Name: PIERRE, EVELINE
Address: P.O.BOX 370809
City-St-Zip: MIAMI, FL 33137

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: WILBERT FILS-AIME

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date