2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080649

MIAMI, FL 33137

City-St-Zip:

Entity Name: TOUT BAGAY INC.

FILED Feb 01, 2005 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:			
8325 N.E. 2ND. AVENUE				13000 GRIFFING BLVD			
100 MIAMI, FL 33138			NORTHIN	NORTH MIAMI, FL 33161			
Current Mailing Address:				New Mailing Address:			
8325 N.E. 2ND. AVENUE 100 MIAMI, FL 33138				13000 GRIFFING BLVD NORTH MIAMI, FL 33161			
FEI Number:		FEI Number Applied For ()	FEI Number Not App	olicable (X)	Certificate of Status De	sired()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
19	, WILBERT 167 STREET AMI BEACH, FL	33162 US	13000 GR	JEAN, ALIX 13000 GRIFFING BLVD NORTH MIAMI, FL 33161 US			
The above in the State		bmits this statement for the pu	ırpose of changing	its registered	office or registered age	nt, or both,	
SIGNATURE: ALIX JEAN				02/01/2005			
	Electronic	Signature of Registered Ager	nt		Date		
Election Carr	npaign Financing T	rust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO () DO JEAN, ALIX 13000 GRIFFING NORTH MIAMI, FL	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PRES () DO FILS-AIME, WILBI 1951 NE 167TH S NORTH MIAMI, FL	ERT T.L #19	Title: Name: Address: City-St-Zip:	PRES () FREDERICK, 12800 NE 3RI NORTH MIAMI	O AVENUE		
Title: Name: Address: City-St-Zip:	V-PR () DO ERNEST, SIMON 8325 N.E. 2ND. AV MIAMI, FL 33138		Title: Name: Address: City-St-Zip:	SECR () JEAN, TANIA 13000 GRIFFI NORTH MIAMI			
Title: Name: Address:	SECR (X) D PIERRE, EVELINE P.O.BOX 370809		Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: ALIX JEAN CEO 02/01/2005