2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102424

Name:

Address: City-St-Zip: SCOFIELD, ROCK J

7760 NW 15 COURT

PEMBROKE PINES, FL 33024

Entity Name: BALLYHOO GROUP INCORPORATED

FILED Aug 09, 2004 Secretary of State

Littly Nai	He. DALLITIC	O GROOF INCORPORATED			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 2	RA STREET LM BEACH, FL	33401			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 2	RA STREET LM BEACH, FL	. 33401			
FEI Number:	20-0232266	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 2 WEST PAL	RA STREET LM BEACH, FL named entity so of Florida.		urpose of changing its registere	d office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
Election Can	ce with s. 607.19	3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VOCINO, TRAV 524 DATURA S	Delete IS C TREET, SUITE 2 EACH, FL 33401	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () GILBERT, WILI 1060 SW 75 TE PLANTATION, F	ERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	P ()	Delete	Title:	() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: TRAVIS VOCINO P 08/09/2004