

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111114

Entity Name: BULL'S EYE INVESTMENTS, INC.

FILED
Mar 27, 2008
Secretary of State

Current Principal Place of Business:

10865 CROSS CREEK BLVD
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10865 CROSS CREEK BLVD
TAMPA, FL 33647

New Mailing Address:

FEI Number: 56-2403861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOUBARAK, NAKHLE
2928 E FLOWER AVE
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

MOUBARAK, NAKHLE
6214 ASHBURY PALMS DR
TAMPA, FL 33647 US

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:

03/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOUBARAK, FADI
Address: 16103 CADBURY CT
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: MOUBARAK, NAKHLE
Address: 2928 E FLOWLER AVE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MOUBARAK, NAKHLE
Address: 6214 ASHBURY PALMS DR
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NAKHLE MOUBARAK

D

03/27/2008

Electronic Signature of Signing Officer or Director

Date