

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025305

Entity Name: BAMBA, INC.

FILED
Feb 22, 2005
Secretary of State

Current Principal Place of Business:

8625 VISTA DEL BOCA DRIVE
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

8625 VISTA DEL BOCA DRIVE
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 20-0754534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED AND COMPANY, CPAS
2424 N. FEDERAL HIGHWAY
SUITE 200
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEKKER, CAREL
Address: 8625 VISTA DEL BOCA DRIVE
City-St-Zip: BOCA RATON, FL 33433

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BEKKER, CAREL
Address: 8625 VISTA DEL BOCA DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: P () Change (X) Addition
Name: BEKKER, CORNELIA
Address: 8625 VISTA DEL BCOA DR
City-St-Zip: BOCA RATON, FL 33433 US

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: CORNELIA BEKKER

P

02/22/2005

Electronic Signature of Signing Officer or Director

Date