


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90552 026 ***150.00

DOCUMENT # P04000085688		
1. Entity Name B.F.T.D. CORPORATION		

Principal Place of Business 10450 SW 157 CT BLDG 2 #201 MIAMI, FL 33196	Mailing Address 10450 SW 157 CT BLDG 2 #201 MIAMI, FL 33196
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14015175



2. Principal Place of Business 15010 Norfolk Lane Suite, Apt. #, etc.	3. Mailing Address 15010 Norfolk Lane Suite, Apt. #, etc.
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04242005 Chg-P CR2E034 (10/03)

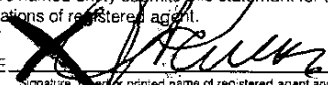
City & State Davie, FL	City & State Davie, FL
Zip 33331	Country USA
Zip 33331	Country USA

4. FEI Number 57-1205937	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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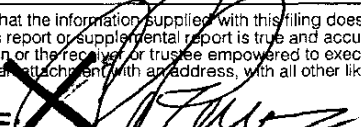
6. Name and Address of Current Registered Agent PANNUNZIO, CHRISTOPHER M 10450 SW 157 CT BLDG 2 #201 MIAMI, FL 33196	
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7. Name and Address of New Registered Agent Name Pannunzio, Christopher M. Street Address (P.O. Box Number is Not Acceptable) 15010 Norfolk Lane City Davie FL Zip Code 33331	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	Christopher M. Pannunzio, Pres 4/20/05

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PANNUNZIO, CHRISTOPHER M 10450 SW 157 CT BLDG 2 #201 MIAMI, FL 33196 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Pannunzio, Christopher M. 15010 Norfolk Lane Davie, FL 33331 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE 	Christopher M. Pannunzio 4/20/05 483-9548 Pres. Date Daytime Phone #