2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162970

City-St-Zip:

MIAMI BEACH, FL 33140

Entity Name: BULKESTATE DEVELOPMENT GROUP, INC

FILED May 01, 2006 Secretary of State

Littly Nan	ile. BOLKES	TATE DEVELOPINIENT GROOF	-, INC.		
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
4340 SHERIDAN ST 2ND FL HOLLYWOOD, FL 33021				C/O 5401 COLLINS AVE STE CU-9 MIAMI BEACH, FL 33140	
Current M	ailing Addres	s:	New Mailing Ad	New Mailing Address:	
4340 SHERIDAN ST 2ND FL HOLLYWOOD, FL 33021			500	100 NORTH BISCAYNE BLVD 500 MIAMI, FL 33132	
FEI Number: 20-2928292 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
4340 SHEF	CHARLES S RIDAN ST 2NE OOD, FL 3302		C/O 5401 CÓLLIN	SOUSSANA, PATRICK C/O 5401 COLLINS AVE STE CU-9 MIAMI BEACH, FL 33140 US	
The above in the State		submits this statement for the p	urpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	RE: PATRICK	SOUSSANA		05/01/2006	
	Electron	ic Signature of Registered Age	nt	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.		
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SOUSSANA, PA	LINS AVE STE CU-9	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHERQUI, DON	LINS AVE STE CU-9	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	BIRS, JEAN-LÚ	Delete C LINS AVE STE CU-9	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 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.

City-St-Zip:

SIGNATURE: PATRICK SOUSSANA D 05/01/2006