

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000168510

FILED
Mar 03, 2006
Secretary of State

Entity Name: BODY ARMOR MARKETING, INC.

Current Principal Place of Business:

521 NW 193RD AVE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

521 NW 193RD AVE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 11-3735058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DONALD, RAMSEY
521 NW 193RD AVENUE
PEMBROKE PINES, FL 33039 US

Name and Address of New Registered Agent:

DONALD, RAMSEY O
521 NW 193RD AVENUE
PEMBROKE PINES, FL 33039 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: DONALD RAMSEY

03/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVIS, DEREK
Address: 521 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD () Delete
Name: BROWN, ANTHONY
Address: 521 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: STD (X) Delete
Name: RAMSEY, DONALD
Address: 521 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D (X) Delete
Name: GIDDENS, ERNEST
Address: 521 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, DEREK L
Address: 521 NW 193RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: STD (X) Change () Addition
Name: RAMSEY, DONALD O
Address: 521 NW 193RD AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

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

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

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.

SIGNATURE: DONALD RAMSEY

STD

03/03/2006

Electronic Signature of Signing Officer or Director

Date