

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000170808
 1. Entity Name
 BULLSEYE GROUP, INC.



Principal Place of Business Mailing Address
 211 NE 59TH COURT 211 NE 59TH COURT
 FT. LAUDERDALE, FL 33334 FT. LAUDERDALE, FL 33334

DO NOT WRITE IN THIS SPACE



07242006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 20-2102696 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BISHOP, RICHARD
 211 NE 59TH COURT
 FT. LAUDERDALE, FL 33334

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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

U000000572656
 07/28/06-80006-013 150.00

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	BISHOP, RICHARD
STREET ADDRESS	211 NE 59TH COURT
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334
TITLE	TREA
NAME	HANSEN, CHAD C
STREET ADDRESS	2400 NE 10TH STREET APT# 301
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 7/24/06 954/491/6068
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone