

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019040

Entity Name: BOCA BLADES INC.

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

22545 SW 66TH AVE
204
BOCA RATON, FL 33428

Current Mailing Address:

22545 SW 66TH AVE
204
BOCA RATON, FL 33428

New Principal Place of Business:

14804 ENCLAVE LAKES DRIVE
C-2
DELRAY BEACH, FL 33484

New Mailing Address:

14804 ENCLAVE LAKES DRIVE
C-2
DELRAY BEACH, FL 33484

FEI Number: 20-2279523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONN, TIMOTHY
22545 SW 66TH AVE
204
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

CONN, TIMOTHY
14804 ENCLAVE LAKES DRIVE
C-2
DELRAY BEACH, FL 33484 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: TIM CONN

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CONN, TIMOTHY
Address: 22545 SW 66TH AVE #204
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CONN, TIMOTHY
Address: 14804 ENCLAVE LAKES DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

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: TIM CONN

P

04/12/2006

Electronic Signature of Signing Officer or Director

Date