

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90299 020 \*\*\*150.00

**DOCUMENT # P05000090093**

1. Entity Name  
**NEDIN' TO BOUNCE- INFLATABLE PARTY RENTALS INC.**



Principal Place of Business

11828 N. 175TH RD  
JUPITER, FL 33478 US

Mailing Address

11828 N. 175TH RD  
JUPITER, FL 33478 US

**60046407**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04052006

Chg-P

CR2E034 (11/05)

4. FEI Number

**86-1141568**

Applied For

Not Applicab

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NEDIN, JAMES E**  
**11828 N. 175TH RD**  
**JUPITER, FL 33478**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME NEDIN, JAMES E  
STREET ADDRESS 11828 N. 175TH RD  
CITY-ST-ZIP JUPITER, FL 33478

TITLE P ☐ Delete  
NAME NEDIN, LEYLA H  
STREET ADDRESS 11828 N. 175TH RD  
CITY-ST-ZIP JUPITER, FL 33478

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addit  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addit  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addit  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**JAMES E. NEDIN**

**04/04/2006 561-746-7776**