2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090981

Entity Name: BAMBOOZE INC.

FILED Apr 03, 2006 Secretary of State

Current P	Principal Place	of Business:	New Principal Place	e of Business:	
15502 MARTINMEADOW DR. LITHIA, FL 33547		16144 CHURCHVIEV STE 202 LITHIA, FL 33547			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
15502 MARTINMEADOW DR. LITHIA, FL 33547		16144 CHURCHVIEN STE 202 LITHIA, FL 33547			
FEI Number	: 20-3066330	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
LITHIA, FL The above			purpose of changing its register	ed office or registered agent, or both	
SIGNATU	RE:				
SIGNATU		nic Signature of Registered Ag	ent	Date	
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	Electror	g Trust Fund Contribution ().		Date BES TO OFFICERS AND DIRECTO	
Election Ca OFFICER Fitle: Name: Address:	Electror mpaign Financing S AND DIREC	g Trust Fund Contribution (). TORS: Delete CHAEL MEADOW DR.			
Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electron mpaign Financing S AND DIREC P/D () MCENTIRE, MI 15502 MARTIN LITHIA, FL 335	Trust Fund Contribution (). TORS: Delete CHAEL MEADOW DR. Delete INE MEADOW DR.	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTO	
Election Ca	Electron mpaign Financing S AND DIREC P/D () MCENTIRE, MI 15502 MARTIN LITHIA, FL 335 VP/D () BAKER, KRIST 15502 MARTIN LITHIA, FL 335	TORS: Delete CHAEL MEADOW DR. Delete INE MEADOW DR. 647 Delete CHAEL MEADOW DR. 647 Delete CHAEL MEADOW DR.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTO () 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.

SIGNATURE: KRISTINE BAKER MS. 04/03/2006