

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
May 30, 2006
Secretary of State**

DOCUMENT# P05000124017

Entity Name: BUNKY'S , INC.

Current Principal Place of Business:

21180 SW 328 ST
HOMESTEAD, FL 33030 US

New Principal Place of Business:

105 NE 1ST ROAD
HOMESTEAD, FL 33030 US

Current Mailing Address:

21180 SW 328 ST
HOMESTEAD, FL 33030 US

New Mailing Address:

105 NE 1ST ROAD
HOMESTEAD, FL 33030 US

FEI Number: 65-1263517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEACH, FLOYD A III
21180 SW 328 ST
HOMESTEAD, FL US US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEACH, FLOYD A III
Address: 21180 SW 328 ST
City-St-Zip: HOMESTEAD, FL 33030 US

Title: VP () Delete
Name: LEACH, REBECCA I
Address: 21180 SW 328 ST
City-St-Zip: HOMESTEAD, FL 33030 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP/T (X) Change () Addition
Name: TYRE, WILLIAM S
Address: 105 NE 1ST ROAD
City-St-Zip: HOMESTEAD, FL 33030 US

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: WILLIAM S TYRE

VP

05/30/2006

Electronic Signature of Signing Officer or Director

_____ Date