2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

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Entity Name: BOMBARDIERE FAMILY ENTERPRISES, INC.

Current Principal Place of Business:

6701 N.W. 21ST TERRACE
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

1684 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952

Current Mailing Address:

6701 N.W. 21ST TERRACE
FORT LAUDERDALE, FL 33309

New Mailing Address:

5265 NW NORTH DELWOOD DR
PORT ST LUCIE, FL 34986

FEI Number: 20-3473055 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CIBENE, PATRICK A
6701 N.W. 21ST TERRACE
FORT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BOMBARDIERE, JOSEPH
Address: 11905 ROYAL PALM BLVD #102
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP ( ) Delete
Name: BOMBARDIERE, ELSA
Address: 11905 ROYAL PALM BLVD #102
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S ( ) Delete
Name: BOMBARDIERE, ROSEANNE
Address: 11905 ROYAL PALM BLVD #102
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T ( ) Delete
Name: CIBENE, PATRICK A
Address: 6701 N.W. 21ST TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: BOMBARDIERE, JOSEPH
Address: 5265 NW NORTH DELWOOD DR
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D (X) Change ( ) Addition
Name: BOMBARDIERE, ELSIE
Address: 5265 NW NORTH DELWOOD DR
City-St-Zip: PORT ST LUCIE, FL 34986

Title: S,D (X) Change ( ) Addition
Name: BOMBARDIERE, ROSEANNE
Address: 5265 NW NORTH DELWOOD DR
City-St-Zip: PORT ST LUCIE, FL 34986

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

Title: VP,D ( ) Change (X) Addition
Name: LOPEZ, YONY
Address: 5265 NW NORTH DELWOOD DR
City-St-Zip: PORT ST LUCIE, FL 34986

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: PATRICK CIBENE T 04/26/2006

Electronic Signature of Signing Officer or Director Date