2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146375

Address:

City-St-Zip:

1686 25TH ST. SW

VERO BEACH, FL 32962

FILED Aug 21, 2007 Secretary of State

Entity Name: BULLSEYE PAINTBALL, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10548 US F PORT ST L	HWY 1 LUCIE, FL 349	52			
Current Ma	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
10548 US F PORT ST L	HWY 1 LUCIE, FL 349	52	973 17TH STREET VERO BEACH, FL 34	1960	
FEI Number:	20-3720549	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DURANTE, JAMES JR 10548 US HWY 1 PORT ST LUCIE, FL 34952 US			ZALVA, DAVID 973 17TH STREET VERO BEACH, FL 34		
The above in the State		ubmits this statement for the pu	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: DAVE ZALVA				08/21/2007	
	Electroni	c Signature of Registered Ager	nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPS () DURANTE, JAMI 865 SW ROCKY PORT ST LUCIE	BAYOU TERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVT () DURANTE, SUS, 865 SW ROCKY PORT ST LUCIE	BAYOU TERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () ZALVA, NELSON	Delete I DAVID	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: DAVID ZALVA VΡ 08/21/2007