2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013984

Entity Name: BAJA 4 X 4, INC.

FILED May 12, 2008 Secretary of State

3881 PACKINGHOUSE ROAD 2181 DIXIE LANE ALVA, FL 33920 ALVA, FL 33920

Current Mailing Address: New Mailing Address:

3881 PACKINGHOUSE ROAD PO BOX 494 ALVA, FL 33920 ALVA, FL 33920

FEI Number: 20-4161707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUGHTALING, MARK
3881 PACKINGHOUSE ROAD
ALVA, FL 33920 US
SUITE 2E
ENGLEWOOD, FL 34223 US

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: ROBERT W. SEGUR, PA 05/12/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition

 Name:
 HOUGHTALING, MARK
 Name:
 SPANIAK, ARLETTE

 Address:
 3881 PACKINGHOUSE ROAD
 Address:
 PO BOX 494

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:
 ALVA, FL 33920

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HOUGHTALING, DENISE
 Name:

 Address:
 3881 PACKINGHOUSE ROAD
 Address:

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:

Title: ST (X) Delete Title: () Change () Addition

 Name:
 HOUGHTALING, DENISE
 Name:

 Address:
 3881 PACKINGHOUSE ROAD
 Address:

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:

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.

SIGNATURE: ARLETTE SPANIAK D 05/12/2008