

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2007 8:00 am
Secretary of State

07-26-2007 90031 039 ***158.75

DOCUMENT # P06000077295 1. Entity Name BOALSA, INC.			
Principal Place of Business 4396 SW 132ND WAY MIRAMAR, FL 33027 US		Mailing Address 4396 SW 132ND WAY MIRAMAR, FL 33027 US	
2. Principal Place of Business - No P.O. Box # 2255 REEFVIEW LOOP Suite, Apt. #, etc.		3. Mailing Address 2255 REEFVIEW LOOP Suite, Apt. #, etc.	
City & State A POPKA FLA Zip 32712		City & State A POPKA, FLA Zip 32712	
Country		Country	
4. FEI Number 20-4983267		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAEMIAN, BOB 4396 SW 132ND WAY 2255 REEFVIEW LOOP MIRAMAR, FL 33027 A POPKA, FLA 32712		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 </div> <div style="width: 30%;"> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> </div> <div style="width: 30%;"> \$5.00 May Be Added to Fees </div> <div style="width: 30%;"> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. </div> </div>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete SAEMIAN, BOB 4396 SW 132ND WAY 2255 REEFVIEW LOOP MIRAMAR, FL 33027 A POPKA, FL 32712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
<small>Date Daytime Phone #</small>			