


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000099694

1. Entity Name
BEAU & THURMAN, INC.



Principal Place of Business 13046 RACETRACK ROAD #139 TAMPA, FL 33626	Mailing Address 13046 RACETRACK ROAD #139 TAMPA, FL 33626
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DO NOT WRITE IN THIS SPACE



03082008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-5340858	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BADYNA, MARTIN
 16114 MUIRFIELD DRIVE
 ODESSA, FL 33556**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U000000868992
 04/09/08-80031-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BADYNA, MARTIN 16114 MUIRFIELD DRIVE ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD BADYNA, LISA 16114 MUIRFIELD DRIVE ODESSA, FL 33556
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Martin R Badyna* **Martin R Badyna** **3-15-08** **813-792-0968**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #