

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000151328

Entity Name: BABY DOLLS OF DAYTONA, INC.

FILED
Jul 23, 2007
Secretary of State

Current Principal Place of Business:

1481 N. US 1
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

1481 N. US 1
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 41-2222560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEATING, GERARD F
318 SILVER BEACH AVENUE
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

MENDES, JOSEPH
1481 N US 1
ORMOND BEACH, FL 32174 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: JOSEPH MENDES

07/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MENDES, JOSEPH JR.
Address: 1481 N. US 1
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D () Delete
Name: KEATING, SUE M DIRECTO
Address: 1481 N. US 1
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP (X) Delete
Name: KEATING, SUE M VICE PR
Address: 1481 N. US 1
City-St-Zip: ORMOND BEACH, FL 32174

Title: SECR (X) Delete
Name: KEATING, SUE M SECRETA
Address: 1481 N. U S 1
City-St-Zip: ORMOND BEACH,, FL 32174

Title: TREA (X) Delete
Name: KEATING, SUE M TREASUR
Address: 1481 N. US 1
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MENDES, JOSEPH DIRECTO
Address: 1481 N. US 1
City-St-Zip: ORMOND BEACH, FL 32174

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

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

Title: () Change () Addition
Name:
Address:
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: SUE KEATING

DIRE

07/23/2007

Electronic Signature of Signing Officer or Director

Date