


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State

01-07-2008 90037 034 ***150.00

DOCUMENT # P07000065216	
1. Entity Name ALAN BAGS INTERNATIONAL, INC.	

Principal Place of Business 2717 WEST CYPRESS CREEK ROAD SUITE 1130 FORT LAUDERDALE, FL 33309	Mailing Address 2717 WEST CYPRESS CREEK ROAD SUITE 1130 FORT LAUDERDALE, FL 33309
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2. Principal Place of Business - No P.O. Box # <i>Same as above</i>	3. Mailing Address <i>Same as above</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country
Zip	Country



01032008 Chg-P CR2E034 (12/06)

4. FEI Number <i>26-0289670</i>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301	
7. Name and Address of New Registered Agent Name <i>Jenny Kay</i> Street Address (P.O. Box Number is Not Acceptable) <i>2717 W. Cypress Creek, Rd Ste. 1130</i> City <i>Fort Lauderdale</i> FL Zip Code <i>33309</i>	

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 <i>Jenny Kay (Jenny Kay)</i> <small>Signature, typed or printed name of registered agent and fee applicable.</small>	<i>1-4-2008</i> <small>DATE</small>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: <i>Jenny Kay</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>1/4/2008</i> <small>Date</small>	<i>354-556-4886</i> <small>Daytime Phone #</small>
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