

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115065

FILED
Apr 17, 2009
Secretary of State

Entity Name: BARDI ENTERPRISES, INC.

Current Principal Place of Business:

1845 NW 112 AVE, SUITE 203
MIAMI, FL 33172

New Principal Place of Business:

8300 NW 53RD STREET, SUITE 350-004
MIAMI, FL 33166

Current Mailing Address:

1845 NW 112 AVE, SUITE 203
MIAMI, FL 33172

New Mailing Address:

8300 NW 53RD STREET, SUITE 350-004
MIAMI, FL 33166

FEI Number: 26-1272934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GBS CONSILTANTS, INC.
18501 PINES BLVD SUITE 201
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DIAMANTI, JOANNA V
Address: 7011 NW 114 CT
City-St-Zip: DORAL, FL 33178

Title: DVPT () Delete
Name: BARRETO, JOSE
Address: 7011 NW 114 CT
City-St-Zip: DORAL, FL 33178

Title: DS () Delete
Name: LARA, NERIO
Address: 7011 NW 114 CT
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOANNA DIAMANTI

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date