2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000064632

Entity Name: BOURBON STREET PUB. INC

FILED Jul 19, 2007 Secretary of State

Entity Name. BOORBC	IN STREET PUB, INC.		
Current Principal Place of Business:		New Principal Place	of Business:
724 DUVAL ST KEY WEST, FL 33040	US		
Current Mailing Address:		New Mailing Address:	
1013 TRUMAN AVENUE KEY WEST, FL 33040	:		
FEI Number: 65-0606106	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
SCHROEDER, JOSEPH 1013 TRUMAN AVENUE KEY WEST, FL 33040			
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATURE:			
Electror	nic Signature of Registered Age	ent	Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PVTS Title: () Delete Title: (X) Change () Addition SCHROEDER, JOSEPH J SCHROEDER, JOSEPH J Name: Name: 1013 TRUMAN AVE Address: 1013 TRUMAN AVE Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 Title: VSTD (X) Delete Title: () Change () Addition SCHROEDER, MARY K Name: Name: Address: 269 N. HOADLY ST. Address: NAUGATUCK, CT 06770 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: SCHROEDER, ROGER A Name: 269 N. HOADLY ST. Address: Address: City-St-Zip: NAUGATUCK, CT 06770 City-St-Zip: Title: (X) Delete Title: () Change () Addition GILLERAN, JAMES G Name: Name: Address: 1013 TRUMAN AVE. Address: City-St-Zip: KEY WEST, FL 33040 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: JOSEPH J. SCHROEDER PRES 07/19/2007