

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010266

Entity Name: BAG VENTURES, INC.

FILED
Feb 21, 2008
Secretary of State

Current Principal Place of Business:

249 PERUVIAN AVE
STE F5
PALM BEACH, FL 33480

New Principal Place of Business:

249 PERUVIAN AVE
SUITE F5
PALM BEACH, FL 33480

Current Mailing Address:

249 PERUVIAN AVE
STE F5
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0814997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, FRED C ESQ
712 US HIGHWAY ONE
SUITE 400
NORTH PALM BEACH, FL 33408 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: PD () Delete
Name: GERL, WAYNE
Address: 249 PERUVIAN AVE., STE. F-5
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: WYNER, JASON L
Address: 249 PERUVIAN AVE., STE. F-5
City-St-Zip: PALM BCH, FL 33480

Title: D () Delete
Name: MOTEZEDI, IRAJ
Address: 249 PERUVIAN AVENUE.SUITE F-5
City-St-Zip: PALM BEACH, FL 33480

Title: STD (X) Delete
Name: ESTEVES, MAURICIO
Address: 1077 30TH STREET,N.W.
City-St-Zip: WASHINGTON, DC 20007

Title: D (X) Delete
Name: BLATNICK, BORIS
Address: 1077 30TH STREET, N.W.
City-St-Zip: WASHINGTON, DC 20007

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DC (X) Change () Addition
Name: WYNER, ROBERT
Address: 249 PERUVIAN AVE., STE. F-5
City-St-Zip: PALM BCH, FL 33480

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: ROBERT WYNER

D

02/21/2008

Electronic Signature of Signing Officer or Director

Date