FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State

SUNT State	te	Secretary of Stat 05-28-2002 91742 010 ***250.00	BR)	DOCUMENT # P98000025833 1. Entity Name BALOFF INC				
2. Principal Place of Business GEO SOUTH WIND CIRCLE Suite, Apt. #, etc. City & State DO NOT WRITE IN THIS SPACE City & State DO NOT WRITE IN THIS SPACE DO NOT WRITE Street Address of Current Registered Desired Street Address of PO. Box Number is Not Acceptable) The Street Address of PO. Box Number is Not Acceptable) The Symbol Space or printed name of registered agreet and this if accidence. POTO E. Dania Beach Blvd # 202 City Weston FL Zig Code 3332 City Street Address of PO. Box Number is Not Acceptable) DATE Palmary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended URIs 18 61: Make Feillet, Loic STREET ADDRESS CITY-Str.Zie Weston, FL 333326 THE MAME STREET ADDRESS CITY-Str.Zie THE NAME STREET ADDRESS CITY-Str.Zie THIE THIE THIE THIE THE THIE T					NC 	LOFE, INC	BAI	
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indicated on this report or supplemental report is true and accurate daily lot like exhibition stated in 19.07(3)(i). Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation of the c

SIGNATURE:

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Daytime Phone #