2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067811

Entity Name: BARDINO INVESTMENTS, INC.

FILED May 16, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

121 GOLDEN ISLE DRIVE 18158 NE 19TH AVE

SUITE #201 NORTH MIAMI BEACH, FL 33162

HALLANDALE BAECH, FL 33009

New Mailing Address: Current Mailing Address:

121 GOLDEN ISLE DRIVE 18158 NE 19TH AVE

NORTH MIAMI BEACH, FL 33162 **SUITE #201** HALLANDALE BAECH, FL 33009

FEI Number: 65-0852532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARDINO, HAROLD BARDINO, HAROLD 5055 SW 89TH AVE 121 GOLDEN ISLE DRIVE COOPER CITY, FL 33328 US **SUITE #201**

HALLANDALE BAECH, FL 33009 US

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: HAROLD BARDINO 05/16/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BARDINO, HAROLD BARDINO, HAROLD Name: Name: 121 GOLDEN ISLE DRIVE SUITE #201 5055 SW 89 AVE Address: Address: City-St-Zip: HALLANDALE BAECH, FL 33009 City-St-Zip: COOPER CITY, FL 33328

Title: () Delete Title: VΡ () Change (X) Addition

Name: Name: CHIONG, ERNESTO 18158 NE 19 AVE Address: Address: N.M.B., FL 33162 City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete SEC

Name: CONDE, ERIK Name: 18158 NE 19 AVE Address Address: City-St-Zip: City-St-Zip: N.M.B., FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HAROLD BARDINO PD 05/16/2005