2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 13, 2006 8:00 am Secretary of State

DOCU 1. Entity Nan BAJI.CO		3166		03-13-2006 90077		
Principal Place of Business 11920 N.W. 87TH COURT		Mailing Address	Ţ	4002000		
f	RDENS, FL 33018	HIALEAH GARDENS, FL		*	liit kalau liike ikali sikik atsia asia	bi il (46)
Principal Place of Business 8/1 Shotgun RD		3. Mailing Address 801 Shotgun RD				
Suite, Apt.		Suite, Apt. #, etc.		03022006 Chg-P	CR2E034 (11/05)	
City & Stat	_{te} FL 33326	City & State Sunrise FL 33326		4. FEI Number 65-0931927	· 1—1—	lied For Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addit	
33326	6. Name and Address of Current	33326 Registered Agent	USA	7. Name and Address of New	Fee Required	
0510110			Name			
GELCH, GARY D 8751 W. BROWARD BOULEVARD SUITE 408		Street Addres		(P.O. Box Number is Not Acceptable)		
PLANTATION, FL 33324						
			City		FL Zip Code	
	e named entity submits this statement to tions of registered agent.	r the purpose of changing its	registered office or reg	istered agent, or both, in the State of F	lorida. I am familiar with, a	nd accept
SIGNATURE.	Signature, typed or printed name or registered agent	and tries if anningable (NOT	: Registured Agent signature re	Clared wine more strong	DATE:	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.	9. Election Campai	gn Financing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND		11.		SICERS AND DIRECTORS	15.1 1.1
TITLE (Say	D OFFICERS AND	Delete .	· TITLE	ADDITIONS/CHANGES TO OF	Change	Addition
NAME STREET ADDRESS	STERN, STEPHEN 11920 N.W. 87TH COURT		NAME STREET ADDRESS	201 Ob. A		
CITY-SI- &P	HIALEAH GARDENS, FL 33018			301 Shotgun Rd Sunrise FL 33326		
TITLE NAME	D STERN, BRETT	☐ Delete	TITLE NAME		Change	Addition
STREET ACORESS CITY-ST-ZIP	11920 N.W. 87TH COURT HIALEAH GARDENS, FL 33018		STREET ADDRESS 8	01 Shotgun Rd		
TITLE			9)	Sunrise FL 33326		
HAME	l	☐ Delete	TITLE	unrise FL 33326	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	umrise FL 33326	☐ Change	Addition
CITY-ST-ZIP		☐ Delate	NAME STREET ADDRESS CITY-ST-ZIP TITLE	umrise FL 33326	· · · · · · · · · · · · · · · · · · ·	Addition
CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	Amrise FL 33326	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP	Omrise FL 33326	☐ Crange	Addition
CITY-ST-ZIP TITLE HAME STREET ADDRESS			NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Amrise FL 33326	☐ Crange	
CHY-ST-ZIP TITE HAME STREET ADDRESS CHY-ST-ZIP TITE		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE	emrise fL 33326	☐ Crange	Addition
CHY-ST-ZIP TITLE HAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Amrise FL 33326	☐ Change	Addition
CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP	Omrise FL 33326	☐ Change	Addition Addition
CITY-ST-ZIP TITLE TAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CUY-ST-ZIP TITLE NAME STREET ADDRESS CUY-ST-ZIP TITLE NAME	Amrise FL 33326	☐ Change	Addition Addition
CITY-ST-ZIP TITLE TIAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is poralion or the receiver or trustee emporation or on an attachment with an adducts, y	Delete Delete Delete this filing does not qualify for true and accurate and that m	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE exemptions contains signature shall have	ined in Chapter 119, Florida Statules. the same legal effect as if made under	Change Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of indicated of the corrochanged.	on this report or supplemental report is poration or the receiver or trustee empore, or on an attachment with an address, where the supplemental report is a supplemental report is provided to the supplemental report is supplemental report is supplemental report is supplemental report is supplemental report in the supplemental repor	Delete Delete Delete this filing does not qualify for true and accurate and that m	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE exemptions contains signature shall have	ined in Chapter 119, Florida Statules. the same legal effect as if made under	Change Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE TABLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 10.LE NAME STREET ADDRESS CITY-ST-ZIP 12. Intercby indicated	on this report or supplemental report is poration or the receiver or trustee empty, or on an attachment with an address, where	Delete Delete Delete this filing does not qualify for true and accurate and that m	NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE exemptions conta The signature shall have as required by Chapter	ined in Chapter 119, Florida Statules. the same legal effect as if made under	Change Change Change	Addition Addition Addition