## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000066571

Entity Name: BALAGAN, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

3741 N.E. 163RD STREET #251 416 POINCIANA ISLE DRIVE NORTH MIAMI BEACH, FL 331604104 NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address: New Mailing Address:

3741 N.E. 163RD STREET #251 416 POINCIANA ISLE DRIVE NORTH MIAMI BEACH, FL 331604104 NORTH MIAMI BEACH, FL 33160 US

FEI Number: 65-0957759 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:

SCOTT, SAMANTHA
3741 N.E. 163RD STREET #251
NORTH MIAMI BEACH, FL 331604104 US
SCOTT, BARBARA
416 POINCIANA ISLE DRIVE
NORTH MIAMI BEACH, FL 33160 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: BARBARA SCOTT 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PCEO ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCOTT, SAMANTHA A
 Name:

 Address:
 465 POINCIANA ISLAND DR
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:

Title: COO () Delete Title: () Change () Addition

 Name:
 SCOTT, BARBARA S
 Name:

 Address:
 416 POINCIANA ISLAND DRIVE
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:

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: BARBARA SCOTT COO 04/28/2004