2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086635

FILED Jan 04, 2008 Secretary of State

Entity Name: BLOND GIRAFFE, INC. **Current Principal Place of Business: New Principal Place of Business:** 107 SIMONTON STREET KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** P.O.BOX 1327 KEY WEST, FL 33041 FEI Number: 65-0951162 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: MADEIRA, BENTO R 107 SIMONTON ST KEY WEST, FL 33040 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MADEIRA, BENTO ROBERTO M MADEIRA, BENTO ROBERTO M Name: Name: 249 GOLF CLUB DRIVE Address: Address:

1205 TRUMAN AVE City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

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

BEGUINATI, TANIA A BEGUINATI, TANIA A Name: Name: 1205 TRUMAN AVE Address: 249 GOLF CLUB DRIVE Address: KEY WEST, FL 33040 KEY WEST, FL 33040 City-St-Zip: 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: BENTO R. MADEIRA MR. 01/04/2008