

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V70474

FILED
Jul 27, 2007
Secretary of State

Entity Name: A COUPLE OF BASKETCASES, INC.

Current Principal Place of Business:

2049 NE 151ST STREET
MIAMI, FL 33162

New Principal Place of Business:

2618 NE 191ST STREET
N MIAMI BEACH, FL 33180

Current Mailing Address:

2049NE 151ST STREET
MIAMI, FL 33162

New Mailing Address:

2618 NE 191ST STREET
N. MIAMI BEACH, FL 33180

FEI Number: 65-0370834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, CARON
2049 NE 151 STREET
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

COLE, CARON
2618 NE 191ST STREET
NORTH MIAMI BEACH, FL 33180 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: CARON COLE

07/27/2007

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:

Title: D () Delete
Name: COLE, CARON
Address: 2049 NE 151ST STREET
City-St-Zip: MIAMI, FL 33162

Title: D () Delete
Name: CRAWFORD, SARA
Address: 2049 NE 151ST STREET
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COLE, CARON
Address: 2618 NE 191ST STREET
City-St-Zip: N MIAMI BEACH, FL 33180

Title: D (X) Change () Addition
Name: CRAWFORD, SARA
Address: 2618 NE 191ST STREET
City-St-Zip: N MIAMI BEACH, FL 33180

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: CARON COLE

D

07/27/2007

Electronic Signature of Signing Officer or Director

Date