

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90006 024 ****70.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # N98000003605 ✓
1. Entity Name
 B & B Books for Children Inc.

Principal Place of Business **Mailing Address**
 430 N.W. 87th Lane unit 202
 Plantation, Fla 33326

2. Principal Place of Business **3. Mailing Address**
 (Same as Above)

City & State **City & State**
 Zip Country Zip Country

4. FEI Number **Applied For**
 65-0847647 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing **\$5.00 May Be Added to Fees**

Trust Fund Contribution.

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
President	Lisa Billins	430 N.W. 87th Lane #202	Plantation, FL 33326	<input type="checkbox"/>
Vice President	Carla Bell	324 S.W. 121 Terrace	Pemproke Pines, FL 33025	<input type="checkbox"/>
Director / Treasurer	Lori Jones	11601 S.W. 26th Court	Davie, Fla. 33330	<input type="checkbox"/>
Director / Secretary	Oliver Black	1611 N.W. 27th Ave	Ft. Lauderdale, FL 33311	<input checked="" type="checkbox"/>
Director	Grant's Bell	324 S.W. 121 Terrace	Pemproke Pines, FL 33025	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lisa Billins / President* (954) 236-3963

CR2E037 (9/99)