


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2007 8:00 am
Secretary of State

05-16-2007 90027 037 ***150.00

DOCUMENT # P04000032837
 1. Entity Name
 BMA ENTERPRISES, INC.



Principal Place of Business Mailing Address
 14025 US HWY 441 NO 3897 NW 22ND AVE
 OKEECHOBEE, FL 34972 OKEECHOBEE, FL 34972

DO NOT WRITE IN THIS SPACE



04302007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0802548	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SPIEGEL & TIRERA PA~~ Lois Gray
~~1840 SW 22ND ST~~ 104 SW 32d Avenue
~~4TH FLOOR~~ Okeechobee FL 34974
~~MIAMI, FL 33145~~

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Lois Gray DATE 04-30-2007
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD ISLAM, AMINUL 4000 ESTATE RD TO EAST 14025 US Hwy 441 No OKEECHOBEE, FL 34972
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE 04-30-2007 DAYTIME PHONE # 863-357-3232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #