## 2005 FOR PROFIT CORPORATION

## FILED Apr 27, 2005 8:00 am

| ANNOAL NEFOR                          |  |                                   |                                       |                          | Secretary of State   |                        |                  |                                  |                         |  |
|---------------------------------------|--|-----------------------------------|---------------------------------------|--------------------------|----------------------|------------------------|------------------|----------------------------------|-------------------------|--|
| DOCUI<br>1. Entity Name<br>THE BAB    |  |                                   |                                       | 04-27-2005 9             | •                    |                        |                  |                                  |                         |  |
| Principal Place                       | e of Business  | Mailing Address                   | Mailing Address                       |                          |                      | 0.0                    | 0.400            |                                  |                         |  |
| 2406 N.W. 20TH STREET                 |  | 2406 N.W. 20TH STREET             |                                       |                          | 20049694             |                        |                  |                                  |                         |  |
| MIAMI, FL 33                          | 3142 US  | MIAMI, FL 33142 U                 | 15                                    |                          |                      |                        |                  | I II <b>ee</b> (111 <b>e</b> 12) | 161 (1 133)             |  |
| 2. Principal Place of Business 3      |  | 3. Mailing Address                |                                       |                          | 2002                 |                        |                  |                                  |                         |  |
| Suite, Apt. #, etc.                   |  | Suite, Apt. #, etc.               |                                       | 042                      | 232005               | Chg-P                  | CR2E03           | 4 (10/03)                        |                         |  |
| City & State                          |  | City & State                      |                                       |                          | El Number<br>65-0545 |                        |                  |                                  | plied For<br>Applicable |  |
| Zip                                   | Country  | Ζiρ                               | Country                               |                          |                      | of Status Desired      |                  | 8.75 Addi<br>ee Required         |                         |  |
|                                       | 6. Name and Address of Current   | Registered Agent                  | Namo                                  | 7N                       | lame and             | Address of New F       | Registered A     | gent                             |                         |  |
| SEVILLA, MARIANO J                    |  |                                   |                                       | Name SEVILLA, MARIANO J. |                      |                        |                  |                                  |                         |  |
| 480 WEST 66TH ST.                     |  |                                   | Street /                              | ddress (P.O. B           | lox Number           | is Not Acceptabl       | e)<br>クF         |                                  |                         |  |
| HIALEAH,                              | FL 33012   |                                   | <del>461</del>                        | <u> </u>                 | II AVCI              | iuc. npos              |                  |                                  |                         |  |
|                                       |  |                                   | City                                  | Miami                    |                      |                        | FL               | Zip Code                         | 6                       |  |
|                                       | named entity submits this statement folions of registered agent.                   | or the purpose of changing its    |                                       |                          | ent, or both         | n, in the State of Pl  | orida. I am fa   |                                  |                         |  |
| SIGNATURE.                            | Mariano J Sevil Signature, typed or printed name of registered agent               |                                   | E: Registered Agent signs             | ture required when re    | oinstating)          |                        | DATE             | · <u> </u>                       |                         |  |
|                                       | E NOW!!! FEE IS \$150.00<br>ay 1, 2005 Fee will be \$550.                          | 9. Election Campa Trust Fund Cont |                                       | \$5.00 M<br>Added to I   |                      |                        |                  |                                  |                         |  |
| 10.                                   | OFFICERS AND   | DIRECTORS                         | 11.                                   | AD                       | DITIONS              | CHANGES TO OF          | FICERS AND       | DIRECTORS                        | S IN 11                 |  |
| TITLE                                 | DP   | ☐ Defete                          | TITLE                                 |                          |                      |                        |                  | Change                           | ☐ Addition              |  |
| NAME<br>STREET ADDRESS                | SEVILLA, MARIANO J<br>480 WEST 66TH ST.  |                                   | NAME<br>STREET ADDRESS                | 4210 N                   | W 79t                | h Avenue,              | Apt. 2           | Ε                                |                         |  |
| CITY-ST-ZIP                           | HIALEAH, FL 33012  |                                   | CITY-ST-ZIP                           |                          |                      | ida 33166              | •                |                                  |                         |  |
| TITLE                                 | vs   | ☐ Delete                          | TITLE                                 |                          |                      |                        |                  | Change                           | ☐ Addition              |  |
| NAME                                  | SEVILLA, NAARA M   |                                   | NAME                                  | 4210 N                   | JJ. 70+              | h Avenue,              | Ant 2            | F                                |                         |  |
| STREET ADDRESS<br>CtTY-ST-ZIP         | 480 WEST 66TH STREET<br>HIALEAH, FL 33012  |                                   | STREET ADDRESS<br>CITY-ST-ZIP         |                          |                      | ida 33166              | Apt. Z           | . 🗠                              |                         |  |
| TITLE                                 | M  | ☐ Delete                          | TITLE                                 | THE CHILL                | , , 101              | 100 00100              | 1                | K) Change                        | ☐ Addition              |  |
| NAME                                  | SEVILLA, NAARA   | _ 5500                            | NAME                                  | 1,040                    | U + 70±              | l                      | A-+ 0            |                                  |                         |  |
| STREET ADDRESS                        | 480 WEST 66TH STREET   |                                   | STREET ADDRESS<br>CITY-ST-ZIP         |                          |                      | h Avenue,<br>ida 33166 |                  | .E                               |                         |  |
| CITY-ST-ZIP                           | HIALEAH, FL 33012  |                                   | TITLE                                 | MI ami,                  | , 1101               | 100 33100              |                  | ☐ Change                         | ☐ Addition              |  |
| NAME                                  |  | ☐ Delete                          | NAME                                  |                          |                      |                        |                  | ☐ cusuda                         | ואסטווטה ב              |  |
| STREET ADDRESS                        |  |                                   | STREET ADDRESS                        |                          |                      |                        |                  |                                  |                         |  |
| CITY-ST-ZIP                           |  | ·· <u>·</u>                       | CITY-ST-ZIP                           |                          |                      |                        |                  |                                  |                         |  |
| TITLE<br>NAME                         |  | ☐ Delete                          | TITLE<br>NAME                         |                          |                      |                        |                  | Change                           | Addition                |  |
| STREET ADDRESS                        |  |                                   | STREET ADDRESS                        |                          |                      |                        |                  |                                  |                         |  |
| CITY-ST-ZIP                           |  |                                   | CITY-ST-ZIP                           |                          |                      |                        | _                |                                  |                         |  |
| TIFLE                                 |  | ☐ Delete                          | TITLE                                 |                          | <del></del>          |                        |                  | ☐ Change                         | ☐ Addition              |  |
|                                       |  |                                   |                                       |                          |                      |                        |                  |                                  |                         |  |
| NAME                                  |  |                                   | NAME<br>STREET ADDRESS                |                          |                      |                        |                  |                                  |                         |  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |                                   | NAME<br>STREET ADDRESS<br>CITY+ST-ZIP |                          |                      |                        |                  |                                  |                         |  |
| STREET ADDRESS<br>CITY-ST-ZIP         | certify that the information supplied wit<br>on this report or supplomental report | h this filing does not qualify fo | STREET ADDRESS<br>CITY+ST-ZIP         | ated in Section          | 119.07(3)(i          | ). Florida Statutes    | . I further cert | ify that the in                  | nformation              |  |

changed, or on an attachment with an address, with all other like empowered. Naara M Sevilla, Manager Mana Sevilla 04/25/65

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

(305) 634-7811