FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT Apr 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3) **B & B MANUFACTURING CO INC** Principal Place of Business Mailmo Address 8100 BRYAN DAIRY ROAD NORTH 8100 BRYAN DAIRY ROAD NORTH LARGO FL 34647 **LARGO FL 34647** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/14/1964 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1112161 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 3377 X Yes 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BONSEY, LOUIS J 8100 BRYAN DAIRY RD. Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34647** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NCLLE Registered Agent signature required when re-ristating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TIFLE BONSEY, JR. LOUIS J. 1.2 NAME NAME 8100 BRYAN DAIRY RD. STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE BONSEY, JOSEPH J. 2 2 NAME NAME 8100 BRYAN DAIRY RD. 2.3 STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP 2 4 CITY - ST- ZIP DELETE Addition 3 1 TITLE Change TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY ST-ZIF DELETE 41 BILE Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-71P 4 4 CITY-ST-ZIP CELETE Change Addition TITLE 51 TITLE 52 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 City-St-ZiP CITY - ST - ZIP DELFTE Change Addition TITLE 6 1 TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-7(P

14. Thereby 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 armust report or supplemental armust 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 direction of the copporation or the recover or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapters, or on an attachment with an address.

SIGNATURE

Joseph Bonsey

FILED

April 17, 1998 813 546 2888