


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90052 048 ***150.00

DOCUMENT # 389104 1. Entity Name BEE BEE'S HIVE, INC.	
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Principal Place of Business 424 SW 22ND AVE MIAMI, FL 33135-3195 US	Mailing Address BEE BEE'S HIVE INC 8781 SW 49TH ST MIAMI, FL 33165-6701 US
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DO NOT WRITE IN THIS SPACE



01122007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1365107	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	
ROBSON, B.J.C. 8781 SW 49 ST MIAMI, FL 33165-6701	Robson, Walter J. 8781 S.W. 49 St. Miami, FL 33165-6701

**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 Walter J. Robson Walter J. Robson 01.13.07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	PSD Robson, Walter J. 8781 SW 49 St. MIAMI, FL 33165-6701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Robson, John 8781 SW 49 Street MIAMI, FL 33165-6701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

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: Walter J. Robson Walter J. Robson 01.13.07 305.643.5008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #