

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2002 8:00 am**  
**Secretary of State**  
 04-17-2002 90096 040 \*\*\*150.00

0308754 AV

**DOCUMENT # 563792**

1. Entity Name  
**B & B LAND & DEVELOPMENT CORP.**

Principal Place of Business  
 2734 E OAKLAND PK BLVD  
 SUITE ~~208~~ 102  
 FT LAUDERDALE FL 33306-1611

Mailing Address  
 2734 E OAKLAND PK BLVD  
 SUITE ~~208~~ 102  
 FT LAUDERDALE FL 33306-1611



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **NOT APPLICABLE**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

**SCHERER, MARY ANN**  
 2734 E OAKLAND PK BLVD  
 FT LAUDERDALE FL 33306

*Suite 102*

Name  
 Street Address (P.O. Box Number is Not Acceptable) *Suite 102*  
 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. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME **TD BROHAMMER, RICHARD** ☐ Delete  
 STREET ADDRESS **3200 NE 38TH ST**  
 CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **VDS BROHAMMER, RUTH** ☐ Delete  
 STREET ADDRESS **3200 NE 38TH ST**  
 CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **PD SCHERER, MARY ANN** ☐ Delete  
 STREET ADDRESS **2734 E OAKLAND PK BLVD**  
 CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME ☐ Change ☐ Addition  
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 NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Mary Ann Scherer*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*4/10/02*

CR2E034 (9/01)