

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 684491

FILED
Apr 13, 2005
Secretary of State

Entity Name: B & B INTERIOR SYSTEMS, INC.

Current Principal Place of Business:

3625 W. BROWARD BLVD.
FT. LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

3625 W. BROWARD BLVD.
FT. LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 59-2066469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURLEY, JEFFREY A
225 E. ACRE DR
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: BURLEY, JEFFREY A
Address: 225 E ACRE DRIVE
City-St-Zip: PLANTATION, FL 33317

Title: VP () Delete
Name: CRAWFORD, WILLIAM B
Address: 1234 LINCOLN STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP () Delete
Name: SPINELLI, LOUISE J
Address: 600 SW 68TH BLVD.
City-St-Zip: PEMBROKE PINES, FL 33023

Title: VP () Delete
Name: NUSSER, DENNIS W
Address: 512 VICTORIA TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY A BURLEY

PDS

04/13/2005

Electronic Signature of Signing Officer or Director

Date