2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # F0300000118 Jan 12, 2006 08:00 AN **Secretary of State** B & K MECHANICAL SERVICES, INC. Principal Place of Business Mailing Address 41 EAST WAREHOUSE COURT 41 EAST WAREHOUSE COURT TAYLORS, SC 29687 TAYLORS, SC 29687 01062006 No Chg-P CR2E034 (11/05) **DO NOT WRITE IN THIS SPACE** Applied For 4. FEI Number 57-0893023 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 3. 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. Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent argusture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will be \$550.00 Tast Fund Contribution U00000383174 Added to Fees <u>2/06-80042-012</u> 10. OFFICERS AND DIRECTORS TITLE NAME DEARMOND, KERRY 41 EAST WAREHOUSE COURT STREET ADDRESS CITY-ST-ZIP TAYLORS, SC 29687 TITLE DEARMOND, K M 41 EAST WAREHOUSE COURT STREET ADDRESS CITY-ST-ZIP TAYLORS, SC 29687 TITLE DEARMOND, BILLIE STREET ADDRESS 41 EAST WAREHOUSE COURT DO NOT WRITE TAYLORS, SC 29687 CITY-ST-ZIP IN THIS SPACE CRAIN, TERRI NAME 41 EAST WAREHOUSE COURT STREET ADDRESS CITY-ST-ZIP TAYLORS, SC 29687 TITLE MANAF STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied indicated on this report or supplemental rees not qualify for the exemptions contained in Chapter 119, Rorida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receive changed, or on an attachment w

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Maurice DeArmond

1-9-06

864-244-9122

Date

Daytime Phone #