

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48086

FILED
Jan 16, 2007
Secretary of State

Entity Name: B B & D OF COCOA BEACH, INC.

Current Principal Place of Business:

P O BOX 372337
SATELLITE BCH, FL 32937

New Principal Place of Business:

5500 N ATLANTIC AV
COCOA BCH, FL 32931

Current Mailing Address:

P O BOX 372337
SATELLITE BCH, FL 32937

New Mailing Address:

FEI Number: 59-2749413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANAPOOR, SHAHROOZ
600 1ST AVE
SATELLITE BEACH, FL 32937 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: PD () Delete
Name: DOBSON, ROGER,
Address: 5500 N ATLANTIC AV
City-St-Zip: COCOA BCH, FL

Title: S () Delete
Name: BJERNING, EUGENE,
Address: 5500 N ATLANTIC AV
City-St-Zip: COCOA BCH, FL

Title: V () Delete
Name: BANAPOOR, SHAHRAM,
Address: 3755 TRANQUILITY DR
City-St-Zip: MELBOURNE, FL 32934

Title: PD () Delete
Name: BANAPOOR, SHAHROOZ,
Address: 3660 TURTLE MOUND RD
City-St-Zip: MELBOURNE, FL

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 Chapter 119, 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: SHAHROOZ BANAPOOR

PD

01/16/2007

Electronic Signature of Signing Officer or Director

_____ Date