

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # K75725

1. Entity Name
3B & 2D CORP.



Principal Place of Business
**7071 58TH ST
PINELLAS PARK, FL 33781 US**

Mailing Address
**C/O BONNIE L. SEYMOUR
6509 33RD AVENUE NO.
ST. PETERSBURG, FL 33710**



02052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2950284

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SEYMOUR, BONNIE LOU
6509 33RD AVE N
ST. PETERSBURG, FL 33710**

**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 _____

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, 2008 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	P SEYMOUR, BONNIE LOU 6509 33RD AVE. N. ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RUSSELL, BARBARA JO 3715 WINDBER BLVD. PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TRIBIANO, DARA 9428 133ND STREET NORTH SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KING, DEBBIE 651 SOUTH INDIANA AVENUE ENGLEWOOD, FL 34223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000820307
02/18/08-80023-014 150.00

**DO NOT WRITE
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: *Bonnie L. Seymour, Pres.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/2008

Date

727-544-1313

Daytime Phone #