

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L01000017966

FILED
May 26, 2005
Secretary of State**Entity Name:** BAM, LLC**Current Principal Place of Business:**790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 US**New Principal Place of Business:****Current Mailing Address:**790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 US**New Mailing Address:****FEI Number:** 59-3748006**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ASSAAD, MIKE
790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 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**MANAGING MEMBERS/MEMBERS:****Title:** MGR () Delete
Name: ASSAAD, MIKE
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103**Title:** MGRM (X) Delete
Name: CORACE, BEN
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: ASSAAD-CORACE CONSTR, UCTION, INC.
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103**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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ASSAAD-CORACE CN INC., BY MIKE ASSAAD VP

MGR

05/26/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date