2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106989

Entity Name: B.B.S. & B. INVESTMENTS, LLC

FILED May 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6278 N FEDERAL HWY

POMPANO BEACH, FL 33060 #631

FORT LAUDERDALE, FL 33308

New Mailing Address: Current Mailing Address:

6278 N FEDERAL HWY 300 NE 2 ST

POMPANO BEACH, FL 33060 #631 FORT LAUDERDALE, FL 33308

FEI Number: 20-8413225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOURNS, DAVID BOURNS, DAVID 6278 N FÉDERAL HWY 300 NE 2 ST

POMPANO BEACH, FL 33060 US #631

FORT LAUDERDALE, FL 33308 US

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: DAVID BOURNS 05/04/2007

> Electronic Signature of Registered Agent Date

> > ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MGR Title: MGR (X) Change () Addition () Delete

BOURNS, DAVID BOURNS, DAVID Name: Name: Address: 6278 N FEDERAL HWY #631 Address: 300 NE 2 ST

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR () Delete Title: () Change () Addition

Name: BRUCE, PETER Name:

Address: 4180 BONNETT CREEK LANE Address: City-St-Zip: HOSCHTON, GA 30548 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

SAFKO, TREVOR Name: SAFKO, TREVOR Name: 6278 N FEDERAL HWY #631 Address: Address: 300 NE 2 ST

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: POMPANO BEACH, FL 33060

() Delete Title: MGR Title: () Change () Addition

Name: BOUTWELL, TAYLOR Name: Address: 329 ROBIN LANE Address: City-St-Zip: MARIETTA, GA 30067 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID BOURNS **MGRM** 05/04/2007