


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 16, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L70676</b> 1. Entity Name BAB GROUP, INC.	
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Principal Place of Business 1320 WEST OAK RIDGE ROAD ORLANDO, FL 32809 US	Mailing Address 1320 WEST OAK RIDGE ROAD ORLANDO, FL 32809 US
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**DO NOT WRITE IN THIS SPACE**



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3049933	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BOGOSLAVSKY, BRUCE A  
1320 WEST OAK RIDGE ROAD  
ORLANDO, FL 32809

**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 Bruce Bogoslavsky DATE 1-14-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BOGOSLAVSKY, BRUCE A DVM 1320 WEST OAK RIDGE RD ORLANDO, FL 32809
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01/16/08-80093-012 150.00

**DO NOT WRITE  
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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: Bruce Bogoslavsky DATE 1-14-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-855-7387