

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M30866

FILED  
Jan 17, 2005  
Secretary of State

Entity Name: B AND B MARKETING ENTERPRISES, INC.

**Current Principal Place of Business:**

910 NE 2ND STREET  
UNIT C  
DEERFIELD BEACH, FL 33441 US

**New Principal Place of Business:**

**Current Mailing Address:**

910 NE 2ND STREET  
UNIT C  
DEERFIELD BEACH, FL 33441 US

**New Mailing Address:**

FEI Number: 65-0027231      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BLUM, R. AMY  
2499 GLADES ROAD  
SUITE 308  
BOCA RATON, FL 33431 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: GRAZZINI, DAVID D  
Address: 237 RD RIO BLVD  
City-St-Zip: BOCA RATON, FL 33432

Title: TSD ( ) Delete  
Name: BERNARD, DAVID  
Address: 237 RD RIO BLVD  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GRAZZINI, DAVID D  
Address: 297 DEL RIO BLVD  
City-St-Zip: BOCA RATON, FL 33432

Title: TSD (X) Change ( ) Addition  
Name: BERNARD, DAVID  
Address: 297 DEL RIO BLVD  
City-St-Zip: BOCA RATON, FL 33432

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 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: BERNARD DAVID

TSD

01/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date