

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002652

FILED
Apr 18, 2006
Secretary of State

Entity Name: BBHN, INC.

Current Principal Place of Business:

4740 N STATE RD 7 SUITE 201
FT LAUDERDALE, FL 33319

New Principal Place of Business:

Current Mailing Address:

4740 N STATE RD 7 SUITE 201
FT LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONIK, STEVEN
4740 N STATE RD 7 SUITE 201
FT LAUDERDALE, FL 33319 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOMCZYK, TOM
Address: 819 NE 26TH STREET
City-St-Zip: FT LAUDERDALE, FL 33305

Title: D () Delete
Name: KATZ, ANDREA
Address: 919 NE 13TH STREET
City-St-Zip: FT LAUDERDALE, FL 333042036

Title: D () Delete
Name: HAYDEN, BRUCE
Address: 11031 NE 6TH AVE
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: FERGUSON, DAVID
Address: 10001 W OAKLAND PARK BLVD
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: WARD, ROBERT
Address: 12550 BISCAYNE BLVD SUITE 919
City-St-Zip: N MIAMI, FL 33181

Title: D () Delete
Name: RONIK, STEVEN
Address: 4740 N STATE RD 7 SUITE 201
City-St-Zip: FT LAUDERDALE, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN RONIK

PRES

04/18/2006

Electronic Signature of Signing Officer or Director

Date