2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005
Secretary of State

DOCUMENT# P00000055257

Entity Name: 2 B'S ASSOCIATION, INC.

Current Principal Place of Business:

6880 NW 44 CT
LAUDERHILL, FL 33319

New Principal Place of Business:

13921 NW 19TH STREET
PEMBROKE PINES, FL 33028

Current Mailing Address:

6880 NW 44 CT
LAUDERHILL, FL 33319

New Mailing Address:

13921 NW 19TH ST
PEMBROKE PINES, FL 33028

FEI Number: 65-1021913 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MALEBRANCHE, ERVE
6880 NW 44 CT
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

MALEBRANCHE, ERVE
13921 NW 19TH STREET
PEMBROKE PINES, FL 33028 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: _____ 03/15/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MALEBRANCHE, ERVE
Address: 6880 NW 44 CT
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete
Name: MALEBRANCHE, BETHINA
Address: 6880 NW 44 CT
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MALEBRANCHE, ERVE
Address: 13921 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Change ( ) Addition
Name: MALEBRANCHE, BETHINA
Address: 13921 NW 19TH ST
City-St-Zip: PEMBROKE PINES, FL 33028

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: ERVE MALEBRANCHE PD 03/15/2005
Electronic Signature of Signing Officer or Director — Date