

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060669

Entity Name: 3B GROUP, INC.

FILED
Apr 14, 2004
Secretary of State

Current Principal Place of Business:

38253 COUNTY RD 439
EUSTIS, FL 32736

New Principal Place of Business:

Current Mailing Address:

PO BOX 1986
EUSTIS, FL 32727

New Mailing Address:

FEI Number: 59-3650946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, STEVEN W
38253 COUNTY RD 439
EUSTIS, FL 32736

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: D () Delete
Name: BISHOP, STEVEN W
Address: 38253 COUNTY RD 439
City-St-Zip: EUSTIS, FL 32736

Title: D () Delete
Name: BISHOP, STEPHANIE J
Address: 38253 COUNTY RD 439
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: BISHOP, STEVEN W
Address: 38253 COUNTY RD 439
City-St-Zip: EUSTIS, FL 32736

Title: SD (X) Change () Addition
Name: BISHOP, STEPHANIE J
Address: 38253 COUNTY RD 439
City-St-Zip: EUSTIS, FL 32736

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: STEVEN W. BISHOP

PCD

04/14/2004

Electronic Signature of Signing Officer or Director

Date