

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000029260

1. Entity Name  
BBF CONSTRUCTION, INC.

Principal Place of Business  
27822 SW 130 CT  
MIAMI FL 33132

Mailing Address  
27822 SW 130 CT  
MIAMI FL 33132

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip

6. Name and Address of Current Registered Agent

KUPERMAN, MARC A  
7695 SW 104 ST, STE 210  
MIAMI FL 33156

4. FEI Number 65-1116547 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State  10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISHER, BUCK B		NAME	
STREET ADDRESS	27822 SW 130 CT		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33132		CITY-ST-ZIP	

TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

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NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Buck B. Fisher*  
Buck B. Fisher  
BBF CONSTRUCTION, INC.  
1/10/02

1-10-02

345-258-0043

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0162433  
AV

FILED  
Feb 11, 2002 8:00 am  
Secretary of State

02-11-2002 90102 033 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CP0704 (9/01)