

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 16, 2002 8:00 am**  
**Secretary of State**

05-16-2002 90054 034 \*\*\*150.00

DOCUMENT # **PO1000035139**

1. Entity Name

**B Administration, Inc.**

**DO NOT WRITE IN THIS SPACE**

16380 South Post Road

16380 South Post Rd

Suite III

Suite III

Weston, FL

Weston, FL

33331

33331

DO NOT WRITE IN THIS SPACE

4. FRI Number  
**65-1100119**

Applied For  
FRI Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name **Ana Malvar**

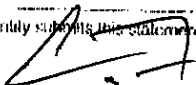
Street Address (P.O. Box Number is Not Applicable)  
**775 SW 148 Ave**

City **Sunrise**

FL Zip Code  
**33325**

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



**AGENT**

**04/29/02**

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is **\$150.00**  
After May 1, Fee is **\$350.00**  
Amended UBR is **\$81.25**  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

11. NAME, STREET ADDRESS, CITY, ST, ZIP

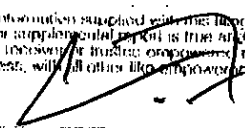
**President  
Ana Malvar  
775 SW 148 Ave  
Sunrise, FL 33325**

TITLE, NAME, STREET ADDRESS, CITY, ST, ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this report does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:



**President 04/29/02**

**(786)5479395**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone