

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000032584

FILED
Jun 02, 2009
Secretary of State**Entity Name:** BEE & DEES SUPPORT SERVICES, INC.**Current Principal Place of Business:**5456 GINGER COVE DR.
#D
TAMPA, FL 33634**New Principal Place of Business:****Current Mailing Address:**5456 GINGER COVE DR.
#D
TAMPA, FL 33634**New Mailing Address:****FEI Number:** 01-0646594**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ACCOUNTING & TAX HELP, INC.
8669 PARK BLVD STE A
SEMINOLE, FL 33777 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: BLUE, BLANCHE
Address: 5456 GINGER COVE DR. # D
City-St-Zip: TAMPA, FL 33634

Title: P (X) Delete
Name: TATE, DAVIDA E
Address: 7203 FIVE POINT CIR #202
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BLANCHE BLUE
Address: 5456 GINGER COVE DR. # D
City-St-Zip: TAMPA, FL 33634

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BLANCHE BLUE

PRES

06/02/2009

Electronic Signature of Signing Officer or Director

Date