2007 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT		Maria National Control of the Contro	
DOCUMENT # P02000072179 1. Entity Name B & G OF TAMPA BAY, INC.		FILED 07 JUL -9 PM 2:51	
Principal Place of Business 2149 COLLIER PKWY LAND 0 LAKES, FL 34639 TAMPA, FL 33610		ALL AND SEE, FE CRIDA	l
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent		01192007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied Fo O2-0630906 Not Applie 5. Certificate of Status Desired \$8.75 Additional Fee Required	_
WARD, WILLIAM E 1721 HILLSIDE DRIVE TAMPA, FL 33610		DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE.			
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution		55.00 May Be udded to Fees	
10. OFFICERS AND DIRECTORS ITILE PD NAME WARD, WILLIAM E STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33610 ITILE NAME STREET ADDRESS CITY-ST-ZIP		800106261358 07/17/0701026901 **550.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME		\$1.1/10	
STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR Date Degrame Phone			