2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jul 31, 2003 8:00 am Secretary of State

7/

DOCUMENT # P0200 1. Entity Name B & B ESTATES INC	07-16-2003 90039 010 ***150.00		
Principal Place of Business 1944 SE PORT ST LUCIE BLVD. PORT ST LUCIE FL 34952 Mailing Address 1944 SE PORT ST LUCIE BLVD. PORT ST LUCIE FL 34952		BLVD.	55052823
Principal Place of Business 3. Mailing Address			
Suite, Apt. #, etc. Suite, Apt. #, etc.		· pr	CHECK HERE IF MAKING CHANGES
City & State City & State			4. FEI Number 54-207/846 Applied For Not Applied be
Zip Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
PEEPLES, BARRIE 1944 SE PORT ST LUCIE BLVD. PORT ST LUCIE FL 34952			A ST LUCE FL ZIDS 1952
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 primare name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS-\$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State			
10. OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
ITILE NAME STREET ADDRESS CITY-ST-ZIP D PEEPLES, BARRIE 1944 SE PORT ST LUCIE BLVD. PORT ST LUCIE FL 34952	□ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8735 5. US 1 Por Sr Lucie FL 34952
TITLE NAME STREET ADDRESS CITY- ST-ZIP	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE _NAME _STREET ADDRESS CHY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition If in Section 119.07(3)(i), Florida Statutes. I further certify that the information

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

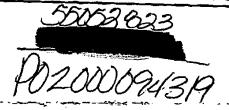
SIGNATURE:

SIGNATURE REQUIRED STRUCTURE DA STRUCTURE DA

Dets 772 345004333

Attachment#

Barry Peebles Port St. Lucie, FL (772) 340-4333



July 09, 2003

State of Florida

To Whom It May Concern:

I recently received notice of a late renewal fee of \$550.00 for my corporation, B\ B Estates. I spoke with your office on July 8, 2003 and they stated they had sent out the original renewal notice back in May. I never received this original notice which was for a renewal fee of \$150.00. They informed me to send the original amount of \$150.00, which I have enclosed with this letter. Please feel free to contact me if you have any further questions.

Sincerely,

Barry Peebles