


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 8:00 am
Secretary of State

03-25-2004 90045 005 ***150.00

DOCUMENT # P02000113030	
1. Entity Name BGB ENTERPRISES AND INVESTMENTS, INC.	

Principal Place of Business 1044 WINIFRED WAY LAKELAND, FL 33809	Mailing Address 1044 WINIFRED WAY LAKELAND, FL 33809
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24028927

2. Principal Place of Business 1288 Lake Deeson Pointe Blvd.	3. Mailing Address 1288 Lake Deeson Pointe Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State 33805	City & State 33805
Country	Country



03182004 Chg-P CR2E034 (10/03)

4. FEI Number 72-1580276	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BROWN, STEPHEN T 1044 WINIFRED WAY LAKELAND, FL 33809	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1288 Lake Deeson Pointe Blvd. City FL Zip Code 33805	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, STEPHEN T 1044 WINIFRED WAY LAKELAND, FL 33809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1288 Lake Deeson Pointe Blvd. 33805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BROWN, DENISE 1044 WINIFRED WAY LAKELAND, FL 33809 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1288 Lake Deeson Pointe Blvd. 33805
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Stephen T Brown 3/23/04 863-688-7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #