## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PS.192

APPLICATION						
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## FLORIDA DEPARTMENT OF STATE

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APPLICATION FLORIDA DEPARTMENT OF STATE  Glenda E. Hood  Glenda F. Hood					. مد	<i>PD -17</i> 8				
DEINICTATEMENT				Secretary of State ISION OF CORPORATIONS			FILE	. h.b	,	
DOC@MENT # P02000116856  1. Corporation Name					(	FILE WHAY 12	AM STATE			
B&B GROUP HOME, INC.				,			SECRETANS	AM 9: 44 STATE SEE, FLORIDA	4	
Principal Place of Business  Mailing Address  11960 SW 172 ST  MIAMI FL 33177  MIAMI FL 33177  MIAMI FL 331			556 127 AVR <del>281</del> 177					1 - U3 - SH1		
	ddresses are		any way, line thro					4. Data Income	everted as Overliffed	
Suite, Apt. #	<u> </u>		ррисаото		ng Office Address, If Applicable		Date Incorporated or Qualified     To Do Business in Florida     10/31/2002			
City & State		<del></del> -		City & State	<u> </u>		5. FEI Number		Applied For	
-				Country	··	-6 <u>-</u>		Not Applicable  \$8,75 Additional Fee required		
Zip Country Zip 3.3\11 7  7. Names and Street Addresses of Each Officer and/or Director (Florida n				7_	<u> </u>	<del>A</del>	<u> </u>	OF STATUS DESIRED	for a Certificate of Status	
7. Names a	and Street Ad	Nam	e of Officers	or Director (Flor	ida nonpi	Stre	et Address of Eacl	h		ty / State / Zip
1	2		or Directors		3	Offi	cer and/or Director	r	4	ty / State / Zip
PD	BLAKE, TI	HELMA			11960 SW 172 ST			MIAMI FL 33177		
STD	D BECKFORD, JOSEPH			11960 SW 172 ST		MIAMI FL 33177 .				
· · · · · · · · · · · · · · · · · · ·			900028228329 02705/0401016004 **150.00					3329 )4 **150.00		
					90028228329 05/12/0401021001 **150.00				3329 )i **!50.00	
	•.									
				,						
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent Name					
BLAKE, THELMA 11960 SW 172 ST			Street Address (P.O. Box Number is Not Acceptable)							
MIAMI FL 33177 Suite, Apt. #, Etc.										
							City			State Zip Code
10. I, being	appointed th	e registered	agent of the abo	ve named corpo	ration, ar	n familiar wi	th and accept the c	bbligations of Secti	ion 607.0505, F.S. or 61	7.0505, F.S.
Signature of Registered Agent Date Date Page Page Page Page Page Page Page Pag										
										further certify that when filing

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

B & B Group Hone Inc. 11960 8W 172 St. Miani, 8l 33177

Dear dis Modaws,

This is to inform you that I

did not receive any unjoins Buriners Report,

I do not know y it come to the mail box and

Some one took it because I loose my

tility beels cometimes, my businers

is new and not get in operation, and

no one lives there so they broke in

there too times.

Thank you very much

Thank you very much.

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