2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Feb 12, 2004 8:00 am Secretary of State

DOCUMENT # P03000039778 1. Entity Name B.B.I. DESIGN, INC.							02-12-2004 90013 024 ***150.00				
Principal Place of Business 1455 RAILHEAD BLVD. #31 NAPLES, FL 34110				Mailing Address 1455 RAILHEAD BLVD, #31 NAPLES, FL 34110			730700 p				
2. Principal Place of Business				iting Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				Chg-P	CR2E034	(10/03)	
City & State			Cit	y & State		4. FE Numb	[™] ∞ 6334	12		plied For Applicable	
Zip	Country				try	5. Certificate of Status Desired . \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
CEUI BET	TH ANN				~~ <u>~~</u> _	=Name					
GEHL, BETH ANN 18401 HUCKLEBERRY RD. NAPLES, FL 34110						Street Address (P.O. Box Number is Not Acceptable)					
•						City			FL	Zip Code	•
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											
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.							5.00 May Be ided to Fees				
10.		OFFICERS AND	DIRECT	ORS		ADDITIONS	/CHANGES TO OFF	ICERS AND D	IRECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ETH ANN ILHEAD BLVD. #31 , FL 34110	☐ Delete						Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP									(Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		[Change	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 by trusteg empowered the 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.											