2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 03, 2005 8:00 am Secretary of State

DOCUMENT # P03000095016 1. Entity Name BKB INVESTMENTS, INC.							08-03-2005	90061 016 **	**150.00
Principal Place of Business 13450 SW 131 STREET MIAMI, FL 33186			Mailing Address 13450 SW 131 STREET MIAMI, FL 33186			50059585			
2. Principal Place of Business Suite, Apr. #, etc.			3. Mailing Address 5W /69 TERR Suite, Apt. #, etc.			06302005 Chg-P CR2E034 (10/03)			
City & State			City & State			4. FEI Number Applied For 20-0192329 Not Applicable			
331	77	Country	33/77	Country -		5. Certificate	of Status Desired	Fee Re	Additional
	6. Name	and Address of Current	Registered Agent	Name		7. Name and	Address of New R	egistered Agent	
BEIRUTI, JOSE 13450 SW 131 STREET MIAMI, FL 33186					Street Address (B.O. Box Number is Not Acceptable) City (AM) FL Zip Cose / 7/7				
9 The obour	named antit	v submits this statement (c	w the number of changing it	ts registered office	/////	rod agent or be	th in the State of Ele		with and accent
8. The above named entity submits this statement (ex 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 plinted name of registered/agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)									
						.00 May Be led to Fees	In accordance v corporation did	with s. 607.193(2 not receive the p	(b), F.S., the prior notice.
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF		
TITLE	P		Delete	TITLE				≱ ⊠ Ch	ange Addition
NAME STREET ADDRESS	BEIRUTI,	JOSE V 131 STREET	NAME STREET ADDRES		14.	513 50	W 169 TO	5RR	
CITY-ST-ZIP	MIAMI, FI			CITY-ST-ZIP			FL 331		
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NAME				NAME					
STREET ADDRESS CITY-ST-ZIP				STREET ADORES CITY-ST-ZIP	S				
12. I hereby certify that the information supplied with this filling 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: BEILDY JUSE BEIRUN-PBES 07/11/05									
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date									