03000095230

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R.A. Change

C. Ocullette DEU 2 3 2005

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: BEB IMWEST & MANAGEMENT GROWP, INC (Name of corporation) DOCUMENT NUMBER: 905A00044696
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NORMA G GORDON (Name of contact person)
BEB INVESTMENT & MANAGMENT GROWP, IN (Firm/Company)
1891 SW 156 Arc (Address)
MIRAMAN £1 33027 (City/state and zip code)
For further information concerning this matter, please call:
NORMO GOLODO at (954) 878 - 2553 (Name of contact person) (Area code & daytime telephone number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 7, 2005

NORMA G. GORDON BEB INVESTMENT & MANAGEMENT GROUP, INC. 1891 SW 156 AVE. MIRAMAR, FL 33027

SUBJECT: BEB INVESTMENT & MANAGEMENT GROUP, INC.

Ref. Number: P03000095230

We have received your document for BEB INVESTMENT & MANAGEMENT GROUP, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

It is unclear what you are trying to do with this application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 405A00055628

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of
1. The name of the corporation: BEB 1A 2. The principal office address: 189	INESTMENT & MANGEMENT Grow
3. The mailing address (if different):	ion 51 33027.
5. The maning address (in different).	
4. Date of incorporation/qualification:	Document number:
5. The name and street address of the current regin Florida Department of State: Daniel 1891 S	
6. The name and street address of the new register (if changed):	red agent (if changed) and /or registered offices PR UF RORDON FIED NORMA GORDON FIED RECTARY UF FIED
1891 SW (P.O. Box NOT a	156 Avenue SE 56 ECEPTABLE FL 33 027
The street address of its registered office and the as changed will be identical.	e street address of the business office of its registered agent,
·	adopted by its board of directors or by an officer so been notified in writing of the change.
(Signature of an officer of director)	(Printed or typed name and title)
I haveby accept the appointment as registered as	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as registered to reflect a change in the registered office address, I otified in writing of this change.
(Signature of Registered Agent)	9-1-05\ (Date)
If signing on behalf of an entity:	
NORMA GORDOM (Typed or Printed Name)	-

* * * FILING FEE: \$35.00 * * *