2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 19, 2005 08:00 AM Secretary of State **DOCUMENT # P03000136192** 1. Entity Name **B&B CUSTOM INCORPORATED** Principal Place of Business Mailing Address 71 PRITCHARD DR. 71 PRITCHARD DR. PALM COAST, FL 32164-7199 PALM COAST, FL 32164-7199 dinament de la company 04132005 No Cha-F CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 84-1633508 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent **BOGLEY, JAMES** DO NOT WRITE 71 PRITCHARD DR. PALM COAST, FL 32164-7199 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BOGLEY, JAMES MAUE STREET ADDRESS 71 PRITCHARD DR. CITY-ST-ZIP PALM COAST, FL 321647199 TITLE BOYLAN, DALE UUUUUU315331 NAME 04/13/45-880020-010 **158.15**-STREET ADDRESS P.O. BOX 1123 FLAGLER BEACH, FL 32136 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZUP MAME STREET ADDRESS CITY-ST-ZIP

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

TITLE NAME STREET ADORESS CITY-ST-ZIP