2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145042

ORTIZ, SAUL

GIBSONTON, FL 33534

11888 HWY 41, ALAFIA MOBILE HOME PK., L 22

Name:

Address:

City-St-Zip:

FILED Jul 09, 2004 Secretary of State

| Entity Nar | me B&BSC | PFFIT & FASCIA, INC. | | | , | |
|---|---|--|--|---|--|--|
| Littly Hai | iic. Daboo | 71111 Q17(OO)7(, 11 1 O. | | | | |
| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
| | EL STREET DN, FL 33534 | | | | | |
| Current Mailing Address: | | | New I | New Mailing Address: | | |
| P.O. BOX (GIBSONT) | 672 DN, FL 33534 | | | | | |
| FEI Number: | 20-0406506 | FEI Number Applied For () | FEI Number No | t Applicable() | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| | TINA EL STREET DN, FL 33534 | | | | | |
| | named entity of Florida. | submits this statement for the p | urpose of chang | ging its registe | red office or registered agent, or both, | |
| SIGNATUR | RE: | | | | | |
| Electronic Signature of Registered Agent | | | | | Date | |
| | | 3(2)(b), F.S., the corporation did not ground Trust Fund Contribution (). | receive the prior | notice. | | |
| OFFICERS | S AND DIREC | TORS: | ADDI | TIONS/CHAN | GES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | PSD (GILDER, JAME 9810 ETHEL S GIBSONTON, F | TREET | Title: Name: Addres: City-St- | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | TD (GILDER, TINA 9810 ETHEL S GIBSONTON, F | | Title: Name: Addres: City-St- | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | V (RICHARDS, R\ 1019 SILVER F APOLLO BEAC | PALM WAY | Title: Name: Addres: City-St- | | (X) Change()Addition D, CHRIS ERVIEW DR. LOT #11 EW, FL 33569 | |
| Title: | V (|) Delete | Title: | ٧ | (X) Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

PETRY, MICHAEL

6906 ESTELLE AVE.

GIBSONTON, FL 33534

SIGNATURE: TINA GILDER TD 07/09/2004