

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032837

Entity Name: BMA ENTERPRISES, INC.

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

14025 US HWY 441 NO  
OKEECHOBEE, FL 34972

## New Principal Place of Business:

## Current Mailing Address:

3897 NW 22ND AVE  
OKEECHOBEE, FL 34972

## New Mailing Address:

FEI Number: 20-0802548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY, LOIS  
104 SW 3RD AVE  
OKEECHOBEE, FL 34974 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: ISLAM, AMINUL  
Address: 14025 US HWY #441 NO  
City-St-Zip: OKEECHOBEE, FL 34972

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: ISLAM, AMINUL  
Address: 14025 US HWY #441 NO  
City-St-Zip: OKEECHOBEE, FL 34972

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: AMINUL ISLAM

PSTD

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date