


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90005 019 ***150.00

DOCUMENT # P04000044510	
1. Entity Name B & P PLAZA PROPERTIES, INC.	

Principal Place of Business 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH FL 33401	Mailing Address 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH FL 33401
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2. Principal Place of Business 1270 NORTH LAKE WAY Suite, Apt. #, etc.	3. Mailing Address 1270 NORTH LAKE WAY Suite, Apt. #, etc.
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1st MOORE

CR2E034 (10/04)

City & State PALM BEACH, FLA.	City & State PALM BEACH, FLA.
Zip 33480	Country
Zip 33480	Country

4. FEI Number 90-0173182	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KOEPEL, JOEL P 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH FL 33401	
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7. Name and Address of New Registered Agent Name A. KENNETH PINCOURT JR Street Address (P.O. Box Number is Not Acceptable) 1270 NORTH LAKE WAY City PALM BEACH FL Zip Code 33480	
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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: <u><i>A. Kenneth Pincourt Jr</i></u> A. KENNETH PINCOURT JR MARCH 29 05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOEPEL, JOEL P 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH FL 33401 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ST A. KENNETH PINCOURT JR 1270 NORTH LAKE WAY PALM BEACH, FLA 33480 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FLAYD P. BLANK 1200 SOUTH FLAGLER DRIVE APT 606 WEST PALM BEACH FLA 33401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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. 561-845-0066 SIGNATURE: <u><i>A. Kenneth Pincourt Jr</i></u> A. KENNETH PINCOURT JR SEC-TREAS MARCH 29 05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>	
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