


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000103192	
1. Entity Name B.B.Q., INC.	

Principal Place of Business 706 S. FEDERAL HWY. DEERFIELD BEACH, FL 33441-5750	Mailing Address 2300 NE 48 COURT LIGHTHOUSE POINT, FL 33064
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DO NOT WRITE IN THIS SPACE



03292006 No Chg-P CR2E034 (11/05)

4. FEI Number 84-1653393	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUDEN, LAWRENCE
2300 NE 48 COURT
LIGHTHOUSE POINT, FL 33064

**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RUDEN, LAWRENCE 2300 NE 48 COURT LIGHTHOUSE POINT, FL 33064
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UD00000533336
05/06/06-80120-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: LAWRENCE RUDEN  4-21-06 954-427-4227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #