2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 08:00 A Secretary of State **DOCUMENT # P05000036001** 1. Entity Name B & M SALES OF THE SOUTH CO. Principal Place of Business Mailing Address 2827 CULLEN LAKE SHORE DRIVE 2827 CULLEN LAKE SHORE DRIVE ORLANDO, FL 33812 ORLANDO, FL 33812 CR2E034 (11/05) 04192007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 71-0979505 Not Applicable \$8.75 Additional 5. Certificate of Status Desired ្រុកពីទីនិះ ខែងគ្រើ។ ប្ Fee Required 6. Name and Address of Current Registered Agent BYERS, EDNA C DO NOT WRITE 2827 CULLEN LAKE SHORE DRIVE ORLANDO, FL 33812 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE' BYERS, EDNA C NAME STREET ADDRESS 2827 CULLEN LAKE SHORE DRIVE ORLANDO, FL 32812 CITY-ST-ZIP MLE n DINKLER, LEONARD R NAME STREET ADDRESS 1536 NW 7TH AVENUE CITY-ST-ZIP GAINESVILLE, FL 32603 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TM E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS U00000723550 CLIV-ST-ZIP 05/02/07-80077-010 158.75

12.- I hereby certify that the information supplied with this liling 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:

TITLE NAME STREET ADDRESS

SHAFURE AND TYPED OR PERNTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/07 352 378 60Z

FILED