

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jan 25, 2007  
Secretary of State**

DOCUMENT# P05000165649

Entity Name: TWO B'S MAINTENANCE, INC.

**Current Principal Place of Business:**

36940 LESLYE LANE  
EUSTIS, FL 32736

**New Principal Place of Business:**

**Current Mailing Address:**

36940 LESLYE LANE  
EUSTIS, FL 32736

**New Mailing Address:**

FEI Number: 22-3919455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BITNER, ROBERT O  
36940 LESLYE LANE  
EUSTIS, FL 32736      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

**OFFICERS AND DIRECTORS:**

Title:            DPS            ( ) Delete  
Name:            BITNER, ROBERT O  
Address:        36940 LESLYE LANE  
City-St-Zip:    EUSTIS, FL 32736

Title:            DVT            ( ) Delete  
Name:            BITNER, ROBERT O JR  
Address:        36940 LESLYE LANE  
City-St-Zip:    EUSTIS, FL 32736

Title:                            ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            DPT            (X) Change ( ) Addition  
Name:            BITNER, ROBERT O  
Address:        36940 LESLYE LANE  
City-St-Zip:    EUSTIS, FL 32736

Title:            DV            (X) Change ( ) Addition  
Name:            BITNER, ROBERT O JR  
Address:        36940 LESLYE LANE  
City-St-Zip:    EUSTIS, FL 32736

Title:            DS            ( ) Change (X) Addition  
Name:            SAMS, RANDY C  
Address:        24744 LEONARD WAY  
City-St-Zip:    EUSTIS, FL 32736

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT O BITNER

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01/25/2007

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

\_\_\_\_\_  
Date