

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087719

FILED
Mar 20, 2008
Secretary of State

Entity Name: BE & ML ENTERPRISES, INC.

Current Principal Place of Business:

906 BUCKEYE DR.
FT. PIERCE, FL 34982

New Principal Place of Business:

672 NW FAIRHAVEN DR.
PORT SAINT LUCIE, FL 34983 US

Current Mailing Address:

906 BUCKEYE DR.
FT. PIERCE, FL 34982

New Mailing Address:

672 NW FAIRHAVEN DR.
PORT SAINT LUCIE, FL 34983 US

FEI Number: 26-0656249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, ELIZABETH M.
906 BUCKEYE DR.
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

PACIFIC GROUP FINANCIAL SERVICES
14335 SW 120 ST.
213
MIAMI, FL 33186 US

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: MANUEL GOMEZ

03/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: LEON, ELIZABETH M.
Address: 906 BUCKEYE DR.
City-St-Zip: FT. PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEON, ELIZABETH M.
Address: 672 NW FAIRHAVEN DR.
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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: ELIZABETH M. LEON

P

03/20/2008

Electronic Signature of Signing Officer or Director

Date