

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90039 047 \*\*\*150.00

**DOCUMENT # P92000003365**

1. Entity Name  
**B&V VENTURES, INC.**



Principal Place of Business  
**BARDMOOR VILLAGE  
10801 STARKEY RD. STE. 106  
LARGO, FL 33777 US**

Mailing Address  
**BARDMOOR VILLAGE  
10801 STARKEY RD. STE. 106  
LARGO, FL 34647**

**24032804**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03252004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

**59-3155684**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33777**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROBERT E. JULIEN  
1001 STARKEY RD  
#465  
LARGO, FL 33771**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME JULIEN ROBERT, E ☐ Delete  
STREET ADDRESS 1001 STARKEY RD, 465  
CITY-ST-ZIP LARGO, FL 33771

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☒ Delete  
NAME JULIEN, VINCE E  
STREET ADDRESS 18716 63RD AVE E  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ST ☐ Delete  
NAME JULIEN, KAREN  
STREET ADDRESS 1001 STARKEY RD #465  
CITY-ST-ZIP LARGO, FL 33771

TITLE VICE-PRES ☒ Change ☐ Addition  
NAME KAREN JULIEN  
STREET ADDRESS 1001 STARKEY RD. # 465  
CITY-ST-ZIP LARGO, FL 33771

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE *Karen Julien* **KAREN JULIEN**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/30/04** **727/397-9010**  
Date Daytime Phone #