

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90007 028 ***150.00

DOCUMENT # **P94000002099**
Corporation Name
B & B ASSOCIATES PROFESSIONAL SEARCH, INC.



Principal Place of Business
**120 S FEDERAL HWY
SUITE B
FT LAUDERDALE FL 33316
US**

Mailing Address
**1120 S FEDERAL HWY
STE B
FT LAUDERDALE FL 33316
US**

DO NOT WRITE IN THIS SPACE

Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
		01/07/1994	65-0458753	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property.
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**GUTIERREZ, WILLIAM
900 COCONUT DRIVE
FT. LAUDERDALE FL 33315-1122**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

I, Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

LE	P	<input type="checkbox"/> DELETE
WE	GUTIERREZ, WILLIAM	
REET ADDRESS	900 COCONUT DR.	
Y-ST-ZIP	FORT LAUDERDALE FL 33315-1122	
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

I, 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

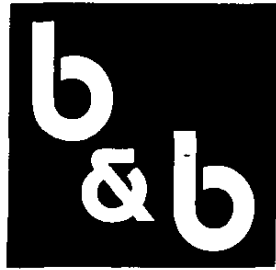
SIGNATURE:

William Gutierrez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/99

954-761-1220

CR2E034 (5/99)



associates

professional search, inc.

P94000002099
587050-90007-28

July 6, 1999

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302 - 1500

Re: Annual Filing Fees

Dear Ms. Harris,

Enclosed, please find the annual report for 1999 and the accompanying fees of \$150.00. Please be advised that the original report was not received and this second notice represents the first receipt of filing requirements. I trust that this matter will be handled appropriately and that any penalties will be waived.

Sincerely,

William Gutierrez, President