## 2005-FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Mar 15, 2005 8:00 am Secretary of State

1. Entity Name BBR CORP.			00036 027 ***150.00
Principal Place of Business Mailing Address	-		មួនពូបតបប
MASSACHUSETTS 5523 GULF OF MEXICO DR. LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228			
LUNGDUALKET, FL 34228 LUNGDUALKET, FL 34220			
Principal Place of Business			
MASSACHUSETTS			
Suite, Apt. #, etc. /A Twinbrook Circleits, Apt. #, etc.  108 WOODSIDE TERRACE		01102005 Chg-P	CR2E034 (10/03)
City & State  LONGMEADOW, MA		4. FEI Number 65-0480484	Applied For Not Applicable
Zip Country Zip	Country	5Cortificate of Status Dosired	60.7E
01106	- ~ ÷		Fee Required
6. Name and Address of Current Registered Agent	Name	7. Name and Address of New	Hegistered Agent
BOGOFF, LESTER H 5523 GULF OF MEXICO DR. Street		s (P.O. Box Number is Not Acceptab	ia)
LONGBOAT KEY, FL 34228	0.000		
	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 requi	red when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 9. Election Campaig After May 1, 2005 Fee will be \$550.00 Trust Fund Contri		5.00 May Be	
<u> </u>	bution. L Ad	dded to Fees	
10. OFFICERS AND DIRECTORS	11.	dded to Fees	FICERS AND DIRECTORS IN 11
<u> </u>		dded to Fees	FICERS AND DIRECTORS IN 11
10. OFFICERS AND DIRECTORS     TITLE	11. TITLE NAME STREET ADDRESS	dded to Fees	
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  MONTGOMERY, MA 01085	11. TITLE NAME STREET ADDRESS CITY - ST - ZIP	dded to Fees	☐ Change ☐ Addition
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	dded to Fees	
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS 108 WOODSIDE DRIVE /2 Twinbrook Circle	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	dded to Fees	☐ Change ☐ Addition
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106	11. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	dded to Fees	☐ Change ☐ Addition ☐ Change ☐ Addition .
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS 108 WOODSIDE DRIVE /2 Twinbrook Circle	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	dded to Fees	☐ Change ☐ Addition
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS 108 WOODSIDE DRIVE /2 Twinbrook Circle  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLL S Delete  BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	dded to Fees	☐ Change ☐ Addition ☐ Change ☐ Addition .
TITLE  NAME  BOGOFF, GARY A  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  LONGMEADOW, MA 01106  TITLE  T  CITY-ST-ZIP  Delete  TITLE  SIREET ADDRESS  CITY-ST-ZIP  LONGMEADOW, MA 01106	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	Change Addition
10. OFFICERS AND DIRECTORS  TITLE P Delete  NAME BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS 108 WOODSIDE DRIVE /2 Twinbrook Circle  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLL S Delete  BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	dded to Fees	☐ Change ☐ Addition ☐ Change ☐ Addition .
10. OFFICERS AND DIRECTORS  TITLE P Delete  BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  REITER, LESLY A  STREET ADDRESS 1408 WOODSIDE DRIVE / 2 Twinbrook Circle  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE S- Delete  BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE DELETE DELETE DELETE DELETE  NAME BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD  LONGMEADOW, MA 01106	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	dded to Fees	Change Addition
TITLE P BOGOFF, GARY A STREET ADDRESS 25 OLD MAIN ROAD  TITLE T Delete  NAME BOGOFF, GARY A STREET ADDRESS 25 OLD MAIN ROAD  TITLE T Delete  NAME REITER, LESLY A STREET ADDRESS 109 WOODSIDE DRIVE / 2 Twinbrook Circle  LONGMEADOW, MA 01106  TITLE S DELET ADDRESS 72 GREEN HILL RD  LONGMEADOW, MA 01106  TITLE DOBLETE  TITLE DELET ADDRESS 72 GREEN HILL RD  LONGMEADOW, MA 01106  TITLE DELET ADDRESS CITY-ST-ZIP DELETE DELETE  DELETE DELETE DELETE DELETE DELETE  DELETE DELETE DELETE DELETE DELETE	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	Change Addition  Change Addition  Change Addition  Change Addition
10. OFFICERS AND DIRECTORS  TITLE P Delete  BOGOFF, GARY A  STREET ADDRESS 25 OLD MAIN ROAD  CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  REITER, LESLY A  STREET ADDRESS 1408 WOODSIDE DRIVE / 2 Twinbrook Circle  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE S- Delete  BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD  CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE DELETE DELETE DELETE DELETE  NAME BRUSH, WENDY E  STREET ADDRESS 72 GREEN HILL RD  LONGMEADOW, MA 01106	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	dded to Fees	Change Addition
TITLE POSITION OFFICERS AND DIRECTORS  TITLE POSITION OFFICERS AND DIRECTORS  TITLE BOGOFF, GARY A  STREET ADDRESS CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE S- Delete  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE NAME BRUSH, WENDY E  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	Change Addition  Change Addition  Change Addition  Change Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CONGMEADOW, MA 01106  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CONGMEADOW, MA 01106  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  COBLETE  COBLET  COBLETE  COBLETE  COBLET  COBLET  COBLETE  COBLET  COBLET  COBL	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
TITLE POSITION OFFICERS AND DIRECTORS  TITLE POSITION OFFICERS AND DIRECTORS  TITLE BOGOFF, GARY A  STREET ADDRESS CITY-ST-ZIP MONTGOMERY, MA 01085  TITLE T Delete  NAME REITER, LESLY A  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE S- Delete  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE NAME BRUSH, WENDY E  STREET ADDRESS CITY-ST-ZIP LONGMEADOW, MA 01106  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	Change Addition  Change Addition  Change Addition  Change Addition
TITLE POSITION OFFICERS AND DIRECTORS  TITLE POSITION OFFICERS AND DIRECTORS  TITLE POSITION OFFICERS AND DIRECTORS  Delete Dele	11.  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	dded to Fees	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition

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 oalh; 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.