2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2007 8:00 am Secretary of State 04-23-2007 90103 024 ***150.00 DOCUMENT # P95000000900 1. Entity Name B & M MAINTENANCE, INC. 40076853 Principal Place of Business Mailing Address 2841 N. OCEAN BLVD 2841 N. OCEAN BLVD #1107 #1107 FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33308 04152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0558273 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOSSOROFO, BOB DO NOT WRITE 2841 N. OCEAN BLVD #1107 IN THIS SPACE FT. LAUDERDALE, FL 33308 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 f 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MOSSOROFO, BOB NAME STREET ADDRESS 2841 N. OCEAN BLVD. -#1107 CITY-ST-ZIP FORT LAUDERDALE, FL 33308 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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

SIGNATURE: (

NAME STREET ADDRESS CITY-ST-ZIP

OFFICER OR DIRECTOR

FILED