FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000004210 (7)**

1. Corporation Name
B & B INVESTMENT GROUP, INC.

Principal Place of Business
PO BOX 55-7244
MIAMI FL 33155

Mailing Address
PO BOX 55-7244
MIAMI FL 33155

3. Date Incorporated or Qualified: **01/17/1995** | 3a. Date of Last Report:

4. FEI Number: **65-0553556** | ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: ATRIUM REGISTERED AGENTS, INC.
82 Street Address (P.O. Box Number is Not Acceptable): 1500 SAN REMO AVENUE
83 SUITE 125
84 City: CORAL GABLES FL 85 Zip Code: 33146

11. Pursuant to the provisions of Section 607.0505 or 617.0502, 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. Statement was authorized by the corporation's Board of Directors. I accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert A. Stanger, VICE PRES. OF ATRIUM REGISTERED AGENTS, INC. DATE: 4/8/96

12. OFFICERS AND DIRECTORS

TITLE: DP
NAME: PARE, BETTY JO
STREET ADDRESS: 6931 SUNRISE PLACE
CITY-ST-ZIP: MIAMI FL 33133
☐ DELETE

TITLE: DVT
NAME: PARE, ADOLPHE A
STREET ADDRESS: 6931 SUNRISE PLACE
CITY-ST-ZIP: MIAMI FL 33133
☐ DELETE

TITLE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

TITLE: V/S/D
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing complies with the requirements of Title XXXVI, Florida Statutes. I further certify that the information indicated on this report or supplemental requirement 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 above, or on an attachment with all other like empowered.

SIGNATURE: Betty Jo Pare' 4/8/96 305-592-3780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BETTY JO PARE'

CR2E034 (12/95)

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