2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

Apr 22, 2002 8:00 am Secretary of State **DOCUMENT #** P95000074180 1. Entity Name 04-22-2002 90204 020 ***150.00 BB&BMANAGEMENT GROUP, INC. Mailing Address Principal Place of Business 3566 COCO LAKE DR 1531 E COMMERCIAL BLVD FT LAUDERDALE FL 33334 **COCONUT CREEK FL 33073** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 58-2206957 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MINTON, MICHAEL D Street Address (P.O. Box Number is Not Acceptable) 1903 S 25TH ST FT PIERCE FL 34947 Zip Code FL City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 3 (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE Delete TITLE NAME WATKINS, DERBY H NAME STREET ADDRESS STREET ADDRESS 3232 WELLINGTON RD CITY-ST-ZIP **ALEXANDRIA VA 22302** CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME MARTINUZZI, DARLENE A NAME STREET ADDRESS 3566 COCO LAKE DR STREET ADDRESS CITY-ST-ZIP COCONUT CREEK FL 33073 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE VΡ NAME NAME TOLSON, SUSAN R STREET ADDRESS STREET ADDRESS 5630 NE 18TH AVE, #307 CITY-ST-ZIP FT LAUDERDALE FL 33334 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME CRISP, CAROLYN NAME STREET ADDRESS 3566 COCO LAKE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL 33073 ☐ Addition ☐ Change ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information adoptiled with this filling 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 11 or Block 12 if

FILED