FILED
May 02, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000007338

1. Entity Name
B&B INTERIORS & MAINTENANCE, INC.

Principal Place of Business	Mailing Address
1008 SPRING LANDING DRIVE WINTER GARDEN, FL 34787-2125	1008 SPRING LANDING DRIVE WINTER GARDEN, FL 34787-2125

DO NOT WRITE IN THIS SPACE

04122005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3355859
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BALINT, JOZSEF
1008 SPRING LANDING DRIVE
WINTER GARDEN, FL 34787-2125

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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 _____ DATE
(Signature, officer or director of registered agent and title if applicable) (No Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $560.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BALINT, JOZSEF
STREET ADDRESS	1008 SPRING LANDING DRIVE
CITY-ST-ZIP	WINTER GARDEN, FL 347872125
TITLE	D
NAME	BALINT, AGNES
STREET ADDRESS	1008 SPRING LANDING DRIVE
CITY-ST-ZIP	WINTER GARDEN, FL 347872126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UD10000356191
05/04/05-80025-022 150.00

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12. 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 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 changed, or on an attached with address, with all other like empowered.

SIGNATURE: Jozsef Balint 4-12-05 (407)656-7444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #