FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P9600008824

Kaufman, Mark S

Kaufman, Irene E

STREET ADDRESS Brodsky, Randall I

STREET ADDRESS Brodsky, Randi L

455 Longboat Key Road PH#4

455 Longboat Key Road PH#4

Longboat Key, FL 34228

Longboat Key, FL 34228

3662 Country Place Blvd.

3662 Country Place Blvd

Sarasota, FL 34233

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

TITLE

1. Entity Name

BKB, INC.

FILED May 08, 2002 8:00 am Secretary of State

05-08-2002 90	0138 007	***15	0.00
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0.0	00	2002	70150	007	150.00

DO NOT WRITE IN THIS SPACE						653094			
2. Principal Pl		· .	3. Mailing Address						
240 S. Pineapple Ave. 10th FT. P.O. Box 4 Suite, Apt. #, etc. Suite, Apt. #, etc.			4994	3		DO NOT WRITE IN THIS SPACE			
Sarasot	Sarasota, Florida City & Slate Sarasot			, Florida		4.	FEI Number 65-0662821		Applied For Not Applicable
^{Zip} 34236		Country USA	^{Zip} 34230	Cour USA				8.75 Additional ee Required	
DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its re-			s registere	Street Addres 193 City Sar	ress (P.O. Box Number is Not Acceptable) 137 Golf Street, 2nd Floor rasota gistered agent, or both, in the State of Florida.				
SIGNATURE	Signature, typed or	r printed name of registered agent and	litle if applicable. (NO	TE: Registere	d Agent signature requ	ired when r	reinstating) D/	NTE .	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - Ma After May 1 Amended Make Check Payable			/ 1, Fee i d UBR i	s \$550.00 s \$61.25	itate	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
STREET ADDRESS 2	Band, Da 240 S. 1	Pineapple Ave	RECTORS						
TITLE D NAME B STREET ADDRESS 2	Band, My 240 S. I	yrna L Pineapple Ave a, FL 34236		TITLE NAME STREE	T ADDRESS ST-ZIP				

#6690-1

DO NOT WRITE IN THIS SPACE

13. I hereby Santasortean for the information indicated on this report of superior structure and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director attachment with an address, with an other like empowered.

NAME

TITLE

TITLE NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

David S. Band, Director

CITY-ST-ZIP

CiTY-ST-ZiP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE! SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/02 (941) 366-6660

Daytime Phone #