

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90490 017 ***150.00

DOCUMENT # P96000096911 1. Entity Name B & B INDUSTRIAL SUPPLY COMPANY, INC.	
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Principal Place of Business 1200 W HAMBURG ST BALTIMORE, MD 21230 US	Mailing Address C/O STEPHEN A HOULD ESQ 114 THIRD STREET NEPTUNE BEACH, FL 32266 US
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94063400

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip 21230 Country /	3. Mailing Address 920 Third Street Suite D City & State Neptune Beach, FL Zip 32266 Country Duval
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04142004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3415267	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HOULD, STEPHEN A ESQ 114 THIRD ST. NEPTUNE BEACH, FL 32266	7. Name and Address of New Registered Agent Name Hould, Stephen A. Street Address (P.O. Box Number is Not Acceptable) 920 Third Street Suite D City Neptune Beach FL Zip Code 32266
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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 STEPHEN A. HOULD DATE 04/15/2004

Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORN, EMANUEL 1200 HAMBURG ST. BALTIMORE, MD 21230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D SCHLOSS, HOWARD 1200 HAMBURG ST BALTIMORE, MD 21230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D SINGER, PAUL 1200 HAMBURG ST W BALTIMORE, MD 21230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENBLATT, HOWARD 1200 W HAMBRUG ST BALTIMORE, MD 21230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DUFRENE, OTIS 1200 W HAMBURG ST BALTIMORE, MD 21230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 4/19/04 443 8916357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR