## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

ANNUAL REPORT				Wiai 24, 2000 00
DOCUMENT # P9700006840				Secretary of S
Entity Name     B & N PERFORMANCE INCORPORATED				
B & IN PERFORMANCE INCORPORAT	ED			
Principal Place of Business	Mailing Address		7	
900 N.W. 6 AVENUE Fort Lauderdale, FL 33311	900 N.W. 6 AVENUE FORT LAUDERDALE, FL 33311			
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			02072008	No Chg-P CR2E034 (11/05)
DO NOT WRITE I	N THIS SPACE	CE	4. FEI Numb	
-			65-073	¢0.75 Aug
			5. Certificate	e of Status Desired Fee Required
6. Name and Address of Current Reg	istered Agent			
FLEMING, BENJAMIN			DΩ	NOT WRITE
2208 N.W. 59TH TERRACE, #68-A LAUDERHILL, FL 33313				
EAGDERINEE, FE GGG 15			IN	THIS SPACE
8: The above named entity submits this statement for the the obligations of registered agent.	purpose of changing its registere	ed office or regist	ered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE			····	
Signature, typed or printed name of registered agent and futerif applicable (NOTE Registered Agent signature)		1 Agent signature requir	red when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution		5.00 May Be Ided to Fees	04/08/08-80083-025 150.00
10. OFFICERS AND DIR	ECTORS			,
TITLE PD				
NAME FLEMING, BENJAMIN SIREET ADDRESS   2208 N.W. 59TH TERRACE				
CITY-ST-ZIP LAUDERHILL, FL 33313		1		
TITLE				
NAME STREET ADDRESS				
City-S1-ZiP				
TITLE	<del></del>			
NAME				
STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE			INI '	THIS SPACE
NAME			11/	I TIO STACE
STREET ADDRESS				
CITY-ST-ZIP				
TITLE NAME				
STREET ADDRESS				
CITY-ST-ZIP				

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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: \_>

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

V 3-20-08