2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097734

Entity Name: B & Q, INC.

FILED Jan 11, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3040 NW GAINESVILLE ROAD OCALA, FL 34475

Current Mailing Address: New Mailing Address:

3040 NW GAINESVILLE ROAD OCALA, FL 34475

FEI Number: 65-0795012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALONSO, ARMANDO

103 CAMINO REAL

HOWEY IN THE HILLS, FL 347373135 US

ALONSO, ARMANDO

36007 LAKE UNITY NURSERY ROAD
FRUITLAND PARK, FL 34731 US

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.

SIGNATURE: 01/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition Name: ALONSO, ARMANDO Name: ALONSO, ARMANDO

Address: 103 CAMINO REAL Address: 36007 LAKE UNITY NURSERY ROAD

City-St-Zip: HOWEY IN THE HILLS, FL 347373135 City-St-Zip: FRUITLAND PARK, FL 34731

Title: VS () Delete Title: VP (X) Change () Addition Name: ALONSO, FRANCISCO Name: ALONSO, FRANCISCO

Address: 103 CAMINO REAL Address: 103 CAMINO REAL

City-St-Zip: HOWEY IN THE HILLS, FL 347373135 City-St-Zip: HOWEY IN THE HILLS, FL 347373135

 $\label{eq:title: Title: VP () Change (X) Addition} \end{Title:}$

Name:Name:MARTINEZ, MARCO AAddress:Address:7246 SPRING MOUNTAIN LANE

City-St-Zip: City-St-Zip: YALAHA, FL 34797

Title: () Delete Title: VP () Change (X) Addition

Name: Name: MURRAY, JOHN

Address: Address: 3040 NW GAINESVILLE ROAD

City-St-Zip: City-St-Zip: OCALA, FL 34475

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARMANDO ALONSO PT 01/11/2005