## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000103176**1. Corporation Name

B & B REALTY, INC.

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90279 025 \*\*\*158.75



	•									
Principal Place of Business Mailing Address								<b>           </b>	<b>1910 A</b> 111 1981	
5416 N.W. 72ND AVE. 5416 N.W. 72ND AVE.										
MIAMI FL 33166 MIAMI FL 33166					l l	DO NOT WRITE IN THIS SPACE				
					3. Date	Incorporated or Qualife				
						/08/1997				
2. Principal Place of Business 2a. Mailing Address					4. FEI	Number		App	lied For	
27 <b>340</b>	O NW 114	AVE 26 3400 NI	W 114	<u> Ave</u>	65	-0806264		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				tifcate of Status Desired	<b>X</b>	\$8.75 A		
22 27					3. 001		~	Fee Rec	——-	
City & Stat	0,000	City & State		يحصدام		tion.Campaign.Financin	يستن 🖯 عند 🛚	\$5,00_		
23 VIII	IMI, FL	28 M/AN	<u>^\</u>			st Fund Contribution -		- Added to	rees	
Zip A 31	70 Country	Λ Zip 22170	Cour	LS.A		corporation owes the c	urrent year in		□No	
24 331	1 b   25   U- 5	). A  29  _231  8	30 C	<u>~ &gt;                                   </u>		sonal Property Tax. ne and Address of Nev	Registered			
	9. Name and Address	of Current Registered Agent		81 Name	4) I	Λ.				
RANHAMII CAROLINA							<u> COIINA</u>			
5440 NAME TO AMPANIE						Box Number is Not Acce	otable)		İ	
MIAMI FL 33166					2400 N	114 74/	<del>-</del>	٠,		
			Į				<u>.'</u>			
			[	84 City	Midne		Fi	85 Zip C	ode 172	
44 Dureupht	to the province of Sections	s 607.0502 and 607.1508, Florida Stat	utes the at	ll ove-named	compration sub	mits this statement for t	ne numose d	f changing its i	egistered	
office or r	egistered agent or both in t	the State of Florida. Such change was	authonzed	by the corpo	oration's board	of directors. I hereby ac	ept the appo	intment as reg	istered	
agent. I a	m familiar with, and accept t	the obligations of, Section 607.0505, F	-iorida Statu	tes.						
SIGNATURE	Signature, typed or printed name of re	pristered agent and title if applicable. (NC	TE: Registered	Agent signature r	required when reinstat	ing)	DATE		<del></del> [	
12.	OFFICERS AND DIRECTORS					TIONS/CHANGES TO	FFICERS A	ND DIRECTOR	RS IN 12	
TITLE	D DELETE 1.		1.1 TIT	E				Change	☐ Addition	
NAME	BENHAMU, CARLOS		1.2 NA	ME	Benha	imu. Carlo	S		Ì	
STREET ADDRESS	2440 MIN 20MB ALE		1.3 ST	REET ADDRESS	3400	NW 114 AV	E			
CITY-ST-ZIP	MIAMI FL 33166		1.4 CIT	Y+ST-ZIP	MIAM	FL 33178				
TITLE	D	☐ DELETE	2.1 TIT	E	<u> </u>	Λ (		Change	☐ Addition	
NAME	BENHAMU, CARLINA		2.2 NA	<b>NE</b>	Benhar	nu. Caroli	AN			
STREET ADDRESS	5416 N.W. 72ND AVE.		2.3 STI	REET ADDRESS	3400	NW 114 A	Æ,		}	
CITY-ST-ZIP	MIAMI FL 33166		2. 4 CF	ry-st-zip	MAIM	FL 3317	<u> </u>	· /-		
TITLE ` -	D	☐ DELETE	3.1 TIT	£	0		4-	Change	☐ Addition	
NAME	BENHAMU, ALBERT		3.2 NA	<b>Λ</b> Ε	benha	mu. Albei	-1			
STREET ADDRESS	5416 N.W. 72ND AVE.		3.3 STI	REET ADDRESS	3400	NW 114 AVE				
CITY-ST-ZIP	MIAMI FL 33166		3.4. CF	IY-ST-ZIP	MIAMI	FL 33178				
TITLE	D	DELETE	4.1 TIT	LE		1 . At .		Change	Addition	
NAME	HERNANDEZ, BLAS		4. 2 NA	ME	Hernan					
STREET ADDRESS	5416 N.W. 72ND AVE.		4.3 STI	REET ADDRESS	3400	NW-114AVE				
CITY-ST-ZIP	MIAMI FL 33166		4.4 CIT	Y-ST-ZIP	MIAMI	FL 33178				
TITLE		☐ DELETE	5.1 TIT					☐ Change	☐ Addition	
NAME			5.2 NA						{	
STREET ADDRESS		*	5.3 ST	REET ADDRESS	}				}	
CITY-ST-ZIP				Y-ST-ZIP						
TITLE		☐ DELETE	6.1 TIT				•	Сhange	☐ Addition	
NAMÉ			6,2 NA							
STREET ADDRESS			6.3 ST	REET ADDRESS					<u> </u>	

14. 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 annual report or supplemental annual 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 emptwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on ap attachment with an adulties with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP