2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINT

SIGNATURE: _

Mar 15, 2007 8:00 am **Secretary of State DOCUMENT # P99000052263** 03-15-2007 90024 023 ***150.00 1. Entity Name BEE BEE'S HOME COOKING, INC. Principal Place of Business Mailing Address 2511 SANFORD AVE. 2511 SANFORD AVE. SANFORD, FL 32773 SANFORD, FL 32773 03082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3580678 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEHIRY, YOSRY DO NOT WRITE 2511 SANFORD AVE. SANFORD, FL 32773 IN THIS SPACE E 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_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BEHIRY, YOSRY NAME 2511 SANFORD AVE. STREET ADDRESS CITY-ST-ZIP SANFORD, FL 32773 TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby 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.

D NAME OF SIGNING OFFICER OR DIRECTOR

FILED

407 328 8554

Davlime Phone #