2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: A

FILED Feb 16, 2005 08:00 AM DOCUMENT # P99000107030 1. Entity Notice **Secretary of State** BFG SUPPLY, INC. Mailing Address Principal Place of Business ADMIRALS COVE GOLF VILLAGE 115 VILLAGE CLUBHOUSE CIRCLE JUPITER FL 33458-7826 ADMIRALS COVE GOLF VILLAGE 115 VILLAGE CLUBHOUSE CIRCLE JUPITER FL 33458-7826 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 13-5677246 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BURGOS, RAYMOND Street Address (P.O. Box Number is Not Acceptable) 115 VILLAGE CLUBHOUSE COURT JUPITER FL 33458 Zip Code ubmits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named and the obligations of re 05 SIGNATURE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete ☐ Addition TITLE TOTAL BURGOS, RAYMOND NAME 115 VILLAGE CLUBHOUSE CIRCLE STREET ADDRESS STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP CITY-ST ZIP Change ☐ Addition Defete TITLE TITLE U000002312**09** NAME NAME 02/16/05-80021-009 150.00 STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY - ST - ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP Addition Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-7IP CITY - ST - ZIP □ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 12. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(f), 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.

AYMOND BURBOS