

**2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 28, 2006 8:00 am**  
**Secretary of State**

03-28-2006 90115 007 \*\*\*150.00



**DOCUMENT # G20865**  
 1. Entity Name  
**B & B HOLDING CORP.**

Principal Place of Business: **ONE N CLEMATIS STREET WEST PALM BEACH FL 33401**  
 Mailing Address: **MRS. HILAIRE BECK 817 FIFTH AVENUE, 5TH FLOOR NEW YORK NY 10021**



2. Principal Place of Business: **P.O. Box 4297**  
 Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.

1st MOORE CR2E034 (10/05)

City & State: **West Palm Beach, FL**  
 Zip: **33402** Country: **US**

4. FEI Number: **58-1502092**  
 Applied For:  Not Applicable

6. Name and Address of Current Registered Agent  
**CHOPIN, L. FRANK ONE N CLEMETIS STREET WEST PALM BEACH FL 33401**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent  
 Name: \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable): **515 N. Flagler Drive**  
 Suite: **300P**  
 City: **West Palm Beach** FL Zip Code: **33401**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS BECK, HILAIRE 817 FIFTH AVE, 5TH FLOOR NEW YORK, NY 10021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BECK, CATHY 181 E 73 ST., APT 16F NEW YORK NY 10021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORDON, JAMIE 628 ORIENTA AVENUE MAMARONECK NY 10543	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Hilaire Beck  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/13/06 Daytime Phone #: 212-759-5515

ATTACHMENT  
DISTINGUISHED  
MANAGEMENT, INC.

40040420

2200 N. FLORIDA MANGO RD.  
SUITE 402  
WEST PALM BEACH, FL 33409  
TELEPHONE: (561) 688-8933

MAILING ADDRESS:  
P.O. BOX 4297  
WEST PALM BEACH, FL 33402  
FACSIMILE: (561) 688-8973

March 20, 2006

Division of Corporations  
Annual Report Section  
P. O. Box 6850  
Tallahassee, FL 32314

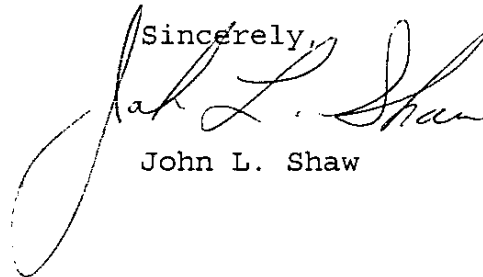
Re: B & B Holding Corp.  
Document # G20865

Dear Sir or Madam:

I enclose the 2006 Annual Report (AR) and \$150.00 filing fee  
for the above referenced corporation.

Please telephone me if you should have any questions.

Sincerely,



John L. Shaw

JLS/  
Enclosures