Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service	This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).	2009
Department of Labor Employee Benefits Security Administration	<ul> <li>Complete all entries in accordance with the instructions to the Form 5500.</li> </ul>	2009
Pension Benefit Guaranty Corporation		This Form is Open to Public Inspection
Part I Annual Report Ider	ntification Information	
For calendar plan year 2009 or fiscal	plan year beginning 01/01/2009 and ending 12/31/2	2009
A This return/report is for:	a multiemployer plan; $X$ a multiple-employer plan; or	
·	a single-employer plan; a DFE (specify)	
<b>B</b> This return/report is:	the first return/report; the final return/report;	
	X an amended return/report; a short plan year return/report (less t	han 12 months).
<b>C</b> If the plan is a collectively-bargain	ed plan, check here	▶□
<b>D</b> Check box if filing under:	Form 5558; automatic extension;	the DFVC program;
	special extension (enter description)	
Part II Basic Plan Infor	nation—enter all requested information	
<b>1a</b> Name of plan THE EMPLOYEES 401(K) RETIREM		<b>1b</b> Three-digit plan number (PN) ▶ 001
		<b>1c</b> Effective date of plan 07/01/2008
2a Plan sponsor's name and addres (Address should include room or B&L SERVICE, INC.	s (employer, if for a single-employer plan) suite no.)	<b>2b</b> Employer Identification Number (EIN) 59-0909335
		<b>2c</b> Sponsor's telephone number 954-565-8900
P.O. BOX 950 FORT LAUDERDALE, FL 33311-095 FORT LAUDERDALE, FL 33302	221 WEST OAKLAND PARK BLVD 0 FORT LAUDERDALE, FL 33311-0950 FORT LAUDERDALE, FL 33302	<b>2d</b> Business code (see instructions) 485310

#### Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2010	MICHAEL GADDIS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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Page 2

	Plan administrator's name and address (if same as plan sponsor, enter "Same") L SERVICE, INC.		Iministrator's EIN 0909335
FC	D. BOX 950 RT LAUDERDALE, FL 33311-0950 RT LAUDERDALE, FL 33302	nu	ministrator's telephone Imber 4-565-8900
4	If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN the plan number from the last return/report:	and	4b EIN
а	Sponsor's name		<b>4c</b> PN
5	Total number of participants at the beginning of the plan year	5	213
6	Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
а	Active participants	6a	270
b	Retired or separated participants receiving benefits	6b	0
С	Other retired or separated participants entitled to future benefits	6c	10
d	Subtotal. Add lines <b>6a</b> , <b>6b</b> , and <b>6c</b>	6d	280
е	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	0
f	Total. Add lines 6d and 6e	6f	280
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	83
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.	6h	1
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2F 2G 2J 2K 2T 3D 3H

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a	<b>9a</b> Plan funding arrangement (check all that apply)			<b>9b</b> Plan benefit arrangement (check all that apply)			
	(1)		Insurance		(1)		Insurance
	(2)		Code section 412(e)(3) insurance contracts		(2)		Code section 412(e)(3) insurance contracts
	(3)	Х	Trust		(3)	X	Trust
	(4)		General assets of the sponsor		(4)		General assets of the sponsor
10	Check a	all ap	plicable boxes in 10a and 10b to indicate which schedules are a	ttache	ed, and, w	here	e indicated, enter the number attached. (See instructions)
а	Pensio	n Sc	hedules	b	General	Sch	hedules
а	Pensio (1)	n Sc X	hedules R (Retirement Plan Information)	b	General (1)	Scł	hedules H (Financial Information)
а		n Sc X		b		Scł X	
а	(1)	n Sc X	<ul> <li>R (Retirement Plan Information)</li> <li>MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan</li> </ul>	b	(1)	Scł	H (Financial Information)
a	(1)	n Sc X	<ul><li>R (Retirement Plan Information)</li><li>MB (Multiemployer Defined Benefit Plan and Certain Money</li></ul>	b	(1) (2)	Scł X	<ul><li>H (Financial Information)</li><li>I (Financial Information – Small Plan)</li></ul>
а	(1)	n Sc	<ul> <li>R (Retirement Plan Information)</li> <li>MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan</li> </ul>	b	(1) (2) (3)	Scł X	<ul> <li>H (Financial Information)</li> <li>I (Financial Information – Small Plan)</li> <li>A (Insurance Information)</li> </ul>

	SCHEDULE C Service Provider Information			OMB No. 1210-0110	
(Form 5500) Department of the Treasury Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).			2009	
Department of Labor Employee Benefits Security Administration	<ul> <li>File as an attachment to Form 5500.</li> </ul>		This F	This Form is Open to Public Inspection.	
Pension Benefit Guaranty Corporation For calendar plan year 2009 or fiscal pla	lan year beginning 01/01/2009	and anding 12/3	1/2009	inspection.	
	an year beginning 01/01/2009	g	1/2009		
A Name of plan THE EMPLOYEES 401(K) RETIREME	NT SAVINGS PLAN	<b>B</b> Three-digit plan number (PN)	•	001	
C Plan sponsor's name as shown on li	ine 2a of Form 5500	D Employer Identifica	tion Number	(EIN)	
B&L SERVICE, INC.		59-0909335			
Part I Service Provider Info	ormation (see instructions)				
or more in total compensation (i.e., n plan during the plan year. If a perso	ordance with the instructions, to report the info money or anything else of monetary value) in o n received <b>only</b> eligible indirect compensation include that person when completing the rem	connection with services rendered t n for which the plan received the rec	o the plan or	the person's position with the	
<ul><li>indirect compensation for which the p</li><li>b If you answered line 1a "Yes," enter</li></ul>	ther you are excluding a person from the rema plan received the required disclosures (see ins r the name and EIN or address of each person insation. Complete as many entries as needed	structions for definitions and condition providing the required disclosures	ons)	Yes No	
	ame and EIN or address of person who provide	ed you disclosures on eligible indire	ect compensa	ation	
FID.INV.INST.OPS.CO.					
04-2647786					
(b) Enter na	ame and EIN or address of person who provid	lad you disclosure on aligible indire	ct compensat	tion	
(b) Enter na	ame and EIN or address of person who provide		ct compensa	tion	
(b) Enter na	me and EIN or address of person who provide		ct compensa	tion	
(b) Enter na	me and EIN or address of person who provide		ct compensa	tion	
	ame and EIN or address of person who provide ame and EIN or address of person who provide	ed you disclosures on eligible indire			

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instru
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#### FIDELITY INVESTMENTS INSTITUTIONAL

#### 04-2647786

(b)	(c)	(d)	(e)	(f)	(g)	(h)	
Service Code(s)	Relationship to employer, employee organization, or person known to be a party-in-interest	Enter direct compensation paid by the plan. If none,	Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect	Did the service provider give you a formula instead of an amount or estimated amount?	
64 65 37 60	RECORDKEEPER	1905	Yes 🛛 No 🗌	Yes 🕺 No 🗌	0	Yes 🗙 No 🗌	
	(a) Enter name and EIN or address (see instructions)						

(b)	(c)	(d)	(e)	(f)	(g)	(h)		
Service Code(s)	Relationship to employer, employee	Enter direct compensation paid by the plan. If none,	Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	Did the service provider give you a formula instead of an amount or estimated amount?		
			Yes 🗌 No 🗌	Yes 🗌 No 🗌		Yes No		
	(a) Enter name and EIN or address (see instructions)							

(b)	(C)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee organization, or person known to be a party-in-interest		Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	
			Yes 🗌 No 🗌	Yes 🗌 No 🗌		Yes 🗌 No 🗌

	(a) Enter name and EIN or address (see instructions)						
(b) Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes No	Yes No		Yes 🗌 No 🗌	
		(	a) Enter name and EIN or	address (see instructions)			
<b>(b)</b> Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	by the plan. If none,	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes 🗌 No 🗍	Yes 🗌 No 🗌		Yes 🗌 No 🗍	
		(	a) Enter name and EIN or	address (see instructions)			
<b>(b)</b> Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes No	Yes 🗌 No 🗍		Yes No	

# Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
ALLNZ NFJ DIV VAL AD - BOSTON FINAN	0.35%	
04-2526037		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
ALLNZ NFJ SMCPVAL AD - BOSTON FINAN	0.35%	
04-2526037		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
BARON GROWTH - DST SYSTEMS, INC.	0.40%	
43-1581814		

# Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine for or the amount of	compensation, including any e the service provider's eligibility the indirect compensation.
COL VALUE AND RSTRG Z - COLUMBIA M	0.35%	
04-2838628		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
JANUS FORTY S - JANUS SERVICES LLC	0.50%	
43-1804048		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
JANUS OVERSEAS S - JANUS SERVICES L	0.50%	
43-1804048		

# Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine for or the amount of	compensation, including any e the service provider's eligibility the indirect compensation.	
KEELEY SMALL CAP VAL - US BANCORP F	0.40%		
39-0281260			
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.	
PIMCO TOT RETURN ADM - BOSTON FINAN	0.25%		
04-2526037			
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility	
		the indirect compensation.	

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Part II Service Providers Who Fail or Refuse to	Provide Inform	nation
4 Provide, to the extent possible, the following information for ea this Schedule.	ach service provide	r who failed or refused to provide the information necessary to complete
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide

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Part III	Termination Information on Accountants and Enrolled (complete as many entries as needed)	d Actuaries (see instructions)
<b>a</b> Nam		<b>b</b> EIN:
C Posi	tion:	
d Add	ress:	e Telephone:
Explanat	ion:	
<b>a</b> Nam	¢.	<b>b</b> EIN:
C Posi		
d Add		e Telephone:
Explanat	ion:	
∟лріана		
<b>a</b> Nam	e:	b EIN:
C Posi	tion:	
d Add	ess:	e Telephone:
Explanat	ion:	
a Nam		b EIN;
C Posi		O Telephone:
<b>d</b> Addı	ess.	e Telephone:
Explanat	ion:	

а	Name:	<b>b</b> EIN;
С	Position:	
d	Address:	e Telephone:

Explanation:

SCHEDULE H Financial Information			OMB No. 1210-0110					
(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).					2009		
Employee Benefits Security Administration Pension Benefit Guaranty Corporation	File as an attachm	ent to Form	5500.			This I	Form is Ope Inspection	
For calendar plan year 2009 or fiscal pla	an year beginning 01/01/2009		and	ending	12/31/2	2009	mopeou	
A Name of plan				в	Three-digit	t		
THE EMPLOYEES 401(K) RETIREMEN	NT SAVINGS PLAN				plan numb	er (PN)	•	001
C Plan sponsor's name as shown on li	ne 2a of Form 5500			DE	Employer Ic	lentificati	on Number (	EIN)
B&L SERVICE, INC.				5	9-0909335			
Part I Asset and Liability S	Statement							
<ol> <li>Current value of plan assets and lial the value of the plan's interest in a c lines 1c(9) through 1c(14). Do not e benefit at a future date. Round off a</li> </ol>	bilities at the beginning and end of the plan commingled fund containing the assets of m nter the value of that portion of an insuranc <b>amounts to the nearest dollar.</b> MTIAs, Cu s also do not complete lines 1d and 1e. See	nore than one e contract wh CTs, PSAs, a	e plan on a nich guaran Ind 103-12	line-by ntees, o	Ine basis during this	unless th plan year	ne value is re , to pay a sp	portable on ecific dollar
As	sets		<b>(a)</b> B	eginniı	ng of Year		<b>(b)</b> End	l of Year
a Total noninterest-bearing cash		1a						
<b>b</b> Receivables (less allowance for dou	ibtful accounts):							
(1) Employer contributions		1b(1)			2	2181		33821
(2) Participant contributions		1b(2)						
(3) Other		1b(3)						
	money market accounts & certificates	1c(1)			210	0751		208303
(2) U.S. Government securities		1c(2)						
(3) Corporate debt instruments (of	her than employer securities):							
(A) Preferred		1c(3)(A)						
(B) All other		1c(3)(B)						
(4) Corporate stocks (other than e	mployer securities):							
(A) Preferred		1c(4)(A)						
(B) Common		1c(4)(B)						
(5) Partnership/joint venture intere	sts	1c(5)						
(6) Real estate (other than employ	er real property)	1c(6)						
(7) Loans (other than to participan	ts)	1c(7)						
(8) Participant loans		1c(8)			69	593		31965
(9) Value of interest in common/co	Ilective trusts	1c(9)						
(10) Value of interest in pooled sepa	arate accounts	1c(10)						
	t investment accounts	1c(11)						
(12) Value of interest in 103-12 inve	estment entities	1c(12)						
<ul> <li>(13) Value of interest in registered i funds)</li> <li>(14) Value of funda hold in incurrent</li> </ul>		1c(13)			1057	495		1555489
	e company general account (unallocated	1c(14)						
(15) Other		1c(15)						

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Schedule H	(Form 5500)	) 2009

1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	1340020	1829578
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	0	2630
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	2630
	Net Assets			
I	Net assets (subtract line 1k from line 1f)	11	1340020	1826948

# Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	<b>(b)</b> Total
а	Contributions:			
	(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	70598	
	(B) Participants	2a(1)(B)	121375	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		191973
b	Earnings on investments:			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1343	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	3972	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		5315
	(2) Dividends: (A) Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	50617	
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		50617
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		

			(a) Amount	(b) Total
2b	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	_	
	(6) Net investment gain (loss) from common/collective trusts	2b(6)		
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
	(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
	(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		279619
С	Other income	2c		
d	Total income. Add all <b>income</b> amounts in column (b) and enter total	2d		527524
	Expenses			
е	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	133227	
	(2) To insurance carriers for the provision of benefits	2e(2)		
	(3) Other	2e(3)		
	(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		133227
f				
g	Certain deemed distributions of participant loans (see instructions)	2g		
h	Interest expense	2h		
i	· · · · · · · · · · · · · · · · · · ·	0.147		
	(2) Contract administrator fees			
	(3) Investment advisory and management fees	0:(0)		
	(4) Other		1905	
	<ul><li>(5) Total administrative expenses. Add lines 2i(1) through (4)</li></ul>			1905
i	Total expenses. Add all <b>expense</b> amounts in column (b) and enter total			135132
J	Net Income and Reconciliation			
k	Net income (loss). Subtract line <b>2j</b> from line <b>2d</b>	2k		392392
I I	Transfers of assets:			
•	(1) To this plan	21(1)	-	94536
		2l(2)	-	
	(2) From this plan			
Pa	art III Accountant's Opinion			
	Complete lines 3a through 3c if the opinion of an independent qualified public attached.	c accountant is a	attached to this Form 5500. Comp	lete line 3d if an opinion is not
a	The attached opinion of an independent qualified public accountant for this pl	lan is (see instru	uctions):	
	(1) Unqualified (2) Qualified (3) X Disclaimer (4)	Adverse		
b	Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.10	03-8 and/or 103	-12(d)?	X Yes 🗌 No
С	Enter the name and EIN of the accountant (or accounting firm) below:			
	(1) Name: GOLDSTEIN ZUGMAN WEINSTEIN AND POOL		(2) EIN: 20-0453834	
ď	The opinion of an independent qualified public accountant is <b>not attached</b> be $(1)$		- E	0500 404 50
	(1) This form is filed for a CCT, PSA, or MTIA. (2) It will be atta	ached to the nex	xt Form 5500 pursuant to 29 CFR	2520.104-50.

Page **4-** 1

Pa	rt IV	Compliance Questions					
4		and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4 2 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.	4f, 4g,	4h, 4k, 4	m, 4n, or 5.		
	During	g the plan year:		Yes	No	Amo	unt
а	period	here a failure to transmit to the plan any participant contributions within the time I described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures Illy corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X		
b	close secure	any loans by the plan or fixed income obligations due the plan in default as of the of the plan year or classified during the year as uncollectible? Disregard participant loans ed by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is ed.).	4b		X		
C	Were	, any leases to which the plan was a party in default or classified during the year as ectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X		
d	report	there any nonexempt transactions with any party-in-interest? (Do not include transactions ed on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is ed.)	4d		x		
е	Was t	his plan covered by a fidelity bond?	4e	Х			200000
f	Did th	e plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused ud or dishonesty?	4f		Х		
g		e plan hold any assets whose current value was neither readily determinable on an ished market nor set by an independent third party appraiser?	4g		x		
h		e plan receive any noncash contributions whose value was neither readily ninable on an established market nor set by an independent third party appraiser?	4h		X		
i		e plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, ee instructions for format requirements.)	4i	Х			
j	value	any plan transactions or series of transactions in excess of 5% of the current of plan assets? (Attach schedule of transactions if "Yes" is checked, and structions for format requirements.)	4j		X		
k		all the plan assets either distributed to participants or beneficiaries, transferred to another or brought under the control of the PBGC?	4k		x		
L	Has th	ne plan failed to provide any benefit when due under the plan?	41		Х		
m		is an individual account plan, was there a blackout period? (See instructions and 29 CFR 101-3.)	4m		x		
n		was answered "Yes," check the "Yes" box if you either provided the required notice or one exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		×		
5a		resolution to terminate the plan been adopted during the plan year or any prior plan year? enter the amount of any plan assets that reverted to the employer this year	Yes	XNo	Amount	:	
5b		ing this plan year, any assets or liabilities were transferred from this plan to another plan(s) erred. (See instructions.)	, identi	fy the pla	n(s) to whic	h assets or liabi	lities were
	5b(1)	Name of plan(s)			5b(2) EIN(s	s)	5b(3) PN(s)

	SCHEDULE R	Retirement Pla	In Information			ON	1B No. 12	10-0110		
	(Form 5500)	This achodula is serviced to be filed	under costion 404 and 4005	af the a			200	9		
	Department of the Treasury Internal Revenue Service	This schedule is required to be filed Employee Retirement Income Secur	ity Act of 1974 (ERISA) and s					-		
E	Department of Labor Employee Benefits Security Administration	- 6058(a) of the Internal Re				This Fo			Publi	c
_	Pension Benefit Guaranty Corporation						Inspect	ion.		
	r calendar plan year 2009 or fisca	plan year beginning 01/01/2009	and end	ang	2/31/2	009				
	Name of plan EEMPLOYEES 401(K) RETIREM	ENT SAVINGS PLAN	1	B Three plan (PN)	-digit numb	er ▶	001			
	Plan sponsor's name as shown or SERVICE, INC.	line 2a of Form 5500	I		oyer Id 09093	entificatio	on Numb	er (EIN	)	
Pa	art I Distributions									
All	references to distributions rela	te only to payments of benefits during th	e plan year.							
1		in property other than in cash or the forms o			1					0
2	Enter the EIN(s) of payor(s) wh payors who paid the greatest do	paid benefits on behalf of the plan to particular amounts of benefits):	sipants or beneficiaries during	the year		e than tw	o, enter	EINs o	f the	two
	EIN(s): 04-6568107									
	Profit-sharing plans, ESOPs,	and stock bonus plans, skip line 3.								
3		deceased) whose benefits were distributed	<b>0 1</b>							
P	Part II Funding Information	tion (If the plan is not subject to the minim			<b>3</b> 412 of	the Inter	nal Reve	enue Co	ode o	r
4	ERISA section 302, s	n election under Code section 412(d)(2) or EF	21SA section $302(d)(2)?$			Yes		No	Π	N/A
7	If the plan is a defined benefit						Ш.			
5	If a waiver of the minimum fund	ng standard for a prior year is being amortiz enter the date of the ruling letter granting the			Da	av	Y	′ear		
		lete lines 3, 9, and 10 of Schedule MB an				•				
6		contribution for this plan year			6a					
	<b>b</b> Enter the amount contribute	d by the employer to the plan for this plan y	ear		6b					
		6b from the amount in line 6a. Enter the rest ft of a negative amount)			6c					
	If you completed line 6c, skip				00					
7	• • •	nt reported on line 6c be met by the funding	deadline?			Yes	<b>۱</b>	lo		N/A
8	automatic approval for the char	hod was made for this plan year pursuant to ge or a class ruling letter, does the plan spo	nsor or plan administrator ag	ree	П	Yes	<b>ء</b> []	10	П	N/A
	automatic approval for the char		nsor or plan administrator ag	ree		Yes	1	lo		N/A
	automatic approval for the char with the change? art III Amendments If this is a defined benefit pension	ge or a class ruling letter, does the plan spo	nsor or plan administrator ag	ree		Yes	1	10		N/A
Ра 9	automatic approval for the char with the change? art III Amendments If this is a defined benefit pensi year that increased or decrease box(es). If no, check the "No" b	ge or a class ruling letter, does the plan spo	nsor or plan administrator ag	ree	Decre		□ N			N/A No
Ра 9	automatic approval for the char with the change? art III Amendments If this is a defined benefit pensi- year that increased or decrease box(es). If no, check the "No" bo	ge or a class ruling letter, does the plan spo on plan, were any amendments adopted dur d the value of benefits? If yes, check the ap	nsor or plan administrator ag ing this plan propriate	e		ease	Both			
Ра 9	automatic approval for the char with the change? art III Amendments If this is a defined benefit pensi- year that increased or decrease box(es). If no, check the "No" be art IV ESOPs (see ins skip this Part.	ge or a class ruling letter, does the plan spo on plan, were any amendments adopted dur d the value of benefits? If yes, check the ap	nsor or plan administrator ag ing this plan propriate Increas er Section 409(a) or 4975(e)	e	nterna	e <b>ase</b> I Revenu	Botl e Code,			
Pa 9	automatic approval for the charge         with the change?         art III       Amendments         If this is a defined benefit pensity year that increased or decreased box(es). If no, check the "No" box         art IV       ESOPs (see ins skip this Part.         Were unallocated employer sed	ge or a class ruling letter, does the plan spo on plan, were any amendments adopted dur d the value of benefits? If yes, check the ap x	nsor or plan administrator ag ing this plan propriate Increas er Section 409(a) or 4975(e) ited securities used to repay	e	nterna ot loar	ease I Revenu ?	Botl e Code,	1	•	No
9 9 Pa 10	automatic approval for the charge         with the change?         art III       Amendments         If this is a defined benefit pensity year that increased or decrease box(es). If no, check the "No" box         art IV       ESOPs (see ins skip this Part.         Were unallocated employer see a Does the ESOP hold any b         b       If the ESOP has an outsta	ge or a class ruling letter, does the plan spo on plan, were any amendments adopted dur d the value of benefits? If yes, check the ap ox	Insor or plan administrator ag ing this plan propriate Increas er Section 409(a) or 4975(e) ated securities used to repay der, is such loan part of a "ba	e	nterna ot loar	ease I Revenu ? ?	Bott     e Code,	n Yes		No
9 9 Pa 10	automatic approval for the charge         with the change?         art III       Amendments         If this is a defined benefit pensity year that increased or decrease box(es). If no, check the "No" box (es). If no, check the "No"	ge or a class ruling letter, does the plan spo on plan, were any amendments adopted dur d the value of benefits? If yes, check the ap exception of the sale of unallocation urities or proceeds from the sale of unallocation oreferred stock?	nsor or plan administrator ag ing this plan propriate Increas er Section 409(a) or 4975(e) ited securities used to repay der, is such loan part of a "ba	e	nterna ot loar t" loan	pase I Revenu ??	Bott     e Code,	Yes Yes Yes Yes		No No No No No

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				v.0923	08.1

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Pa	rt V	1	Additional Information for Multiemployer Defined Benefit Pension Plans					
13		nter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in						
·	aoi a		ars). See instructions. Complete as many entries as needed to report all applicable employers. Name of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	ŭ	and s	ee instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year					
	е	<i>comp</i> (1)	ibution rate information ( <i>If more than one rate applies, check this box</i> and see <i>instructions regarding required attachment. Otherwise,</i> <i>lete items 13e(1) and 13e(2).)</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):					
		( )						
	а		e of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	e	<i>comp</i> (1)	ibution rate information ( <i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>lete items 13e(1) and 13e(2).)</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):					
	а	Name	e of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	e	<i>comp</i> (1)	ibution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, lete items 13e(1) and 13e(2).) Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):					
	а	Name	e of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	e	Contri comp (1)	ibution rate information ( <i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>Idete items 13e(1) and 13e(2).</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):					
	а	Name	e of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	e	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)         (1)       Contribution rate (in dollars and cents)         (2)       Base unit measure:         Hourly       Weekly						
	а	Name	e of contributing employer					
	b	EIN	C Dollar amount contributed by employer					
	d	Date	collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box					
	e	Contri comp (1)	ibution rate information ( <i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>Idete items 13e(1) and 13e(2).</i> ) Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):					

14	Enter the number of participants on whose behalf no contributions wer	re made by an employer as an employer of the
----	---	--

	participant for:						
	a The current year	. 14a					
	<b>b</b> The plan year immediately preceding the current plan year	. 14b					
	C The second preceding plan year	14c					
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to me employer contribution during the current plan year to:	ake an					
	a The corresponding number for the plan year immediately preceding the current plan year	. 15a					
	<b>b</b> The corresponding number for the second preceding plan year	15b					
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:						
	a Enter the number of employers who withdrew during the preceding plan year	16a					
	<b>b</b> If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b					
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, o supplemental information to be included as an attachment.						
Ρ	art VI Additional Information for Single-Employer and Multiemployer Defined Bener	iit Pens	ion Plans				
18							
19	If the total number of participants is 1,000 or more, complete items (a) through (c)						
	<ul> <li>a Enter the percentage of plan assets held as: Stock:% Investment-Grade Debt:% High-Yield Debt:% Real Estate:% Other:%</li> <li>b Provide the average duration of the combined investment-grade and high-yield debt: 0-3 years 3-6 years 6-9 years 9-12 years 12-15 years 15-18 years 18-21 years 21 years or more</li> </ul>						
	C What duration measure was used to calculate item 19(b)?						

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

AND INDEPENDENT AUDITORS' REPORT

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN TABLE OF CONTENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

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#### **Certified Public Accountants and Consultants**

Irving L. Goldstein, CPA, PA David B. Zugman, CPA, PA Frederick S. Weinstein, CPA, PA Keenan L. Poole, CPA, PA David B. Black, CPA, PA Steven M. Borisman, CPA, PA George F. Horvath, CPA, PA Geraldine (Dee Dee) Poole, CPA Christopher Parsotan, CPA Adele R. Shea, CPA Barbara Gayle, CPA Michael Preville, CPA 701 West Cypress Creek Road Suite 300 Fort Lauderdale, FL 33309 Broward 954.351.9000 Palm Beach 561.393.0411 Miami-Dade 305.947.7717 Fax 954.351.9011 admin@gzwpcpa.com

October 11, 2010

#### INDEPENDENT AUDITORS' REPORT

To the Trustees of The Employees 401(k) Retirement Savings Plan Fort Lauderdale, Florida

We were engaged to audit the financial statements of The Employees 401(k) Retirement Savings Plan as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and for the period from inception, July 1, 2008, to December 31, 2008, and the supplemental schedules as of December 31, 2009 and 2008 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Fidelity Management Trust Company ("Fidelity"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Wenster Doole, JJC Wirran. GOLDSTEIN, ZUGMAN,

WEINSTEIN & POOLE, LLC

Page 1

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	As of December 31,	
	2009	2008
ASSETS		
Investments At Fair Value:		
Shares of registered investment companies	\$1,763,792	\$1,268,246
Participant loans	31,965	<u>69,593</u>
Total Investments	1,795,757	1,337,839
Receivables:		
Participants' contributions	0	2,181
Employers' contributions	33,821	<u>36,777</u>
Total Receivables	33,821	38,958
TOTAL ASSETS	1,829,578	1,376,797
LIABILITIES		
	0 (20	0
Other payables	2,630	0
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2009	For the Period From Inception, July 1, 2008 Through December 31, 2008
ADDITIONS/(SUBTRACTIONS) TO NET ASSETS ATTRIBUTED TO:		
Investment Income/(Loss): Net appreciation/(depreciation) of fair value of investments Dividends Interest from participant loans Other interest Total Investment Income/(Loss)	\$ 279,619 50,617 3,972 <u>1,343</u> <u>335,551</u>	$\begin{array}{r} \$ (371,895) \\ 38,918 \\ 3,223 \\ \underline{1,343} \\ (328,411) \end{array}$
Contributions: Participants Employer match Total Contributions Total Additions/(Subtractions)	121,375 <u>33,821</u> <u>155,196</u> <u>490,747</u>	$ \begin{array}{r} 62,573 \\ \underline{36,777} \\ \underline{99,350} \\ \underline{(229,061)} \end{array} $
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants Administrative expenses	133,227 1,905	81,848 175
Total Deductions	135,132	82,023
Increase/(Decrease) Before Transfers	355,615	(311,084)
Plan Transfers In	94,536	1,687,881
NET INCREASE	450,151	1,376,797
Net Assets Available For Benefits – Beginning of Year	<u>1,376,797</u>	0
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

#### NOTE 1 - DESCRIPTION OF THE PLAN

The following description of The Employees 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement and amendments for a more complete description of the Plan's provisions.

General – The employees of B&L Service, Inc. and its related entities were initially participants in the multi-employer AequiCap Employer Services Retirement Savings Plan. Effective July 1, 2008, B&L Service, Inc. and its related entities terminated their participation in the AequiCap Employer Services Retirement Savings Plan and transferred their assets to their successor stand-alone plan sponsored by B&L Service, Inc. (the "Plan Sponsor").

Eligibility – The Plan covers all employees, as defined in the Plan, who have completed six months of service and attained the age of 18.

Employee Contributions – Participants may elect to contribute from 1% to 90% of their pre-tax compensation, after-tax compensation (Roth contribution), or any combination thereof for the years ended December 31, 2009 and 2008, as defined in the Plan, up to a maximum of \$16,500 and \$15,500, respectively. Participants who have attained age 50 during the Plan year may make an elective deferral contribution of \$5,500 and \$5,000 during 2009 and 2008, respectively. The percentage may be changed as of any subsequent Plan entry date. Any such change will apply only after its effective date, and after it is executed and filed with the Plan Administrator. Fund allocations may be changed by the participants at any time.

Employer Contributions – The discretionary employer-provided matching contribution for the years ended December 31, 2009 and 2008 was 50% of the participant's elective deferral up to a maximum of 3% of their qualified wages.

The total of employer and employee contributions, per participant, is limited to the lesser of \$49,000 and \$46,000 for the years ended December 31, 2009 and 2008, respectively, or 100% of the participant's eligible pre-tax compensation for the year.

Participant Accounts – Each participant's account is credited with the participant's contribution and employer-provided matching contributions, Plan earnings, and charged with management or service fees. Allocations are based on participant earnings or account balances, as defined by the Plan. Additional administrative fees are charged by the custodian upon fund withdrawal. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participant contributions are 100% vested. Discretionary employer-provided matching contributions are 20% vested after two years of service and 20% for each additional year of service. Automatic 100% vesting occurs upon attainment of normal retirement age (65), upon retirement due to disability, upon death, and upon termination of the Plan.

A year of service for vesting purposes is obtained upon each participant's employment anniversary date.

# NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Investment Options – Participants may direct contributions in 1% increments to any of the investment options offered by the Plan. The investment options include money market funds and various mutual funds. The fund values are computed daily by the custodians and reflect changes in the unit values of the investments.

Participant Loans – Participants can borrow up to 50% from the vested balance of their fund account with a minimum of \$1,000 up to a maximum of \$50,000. Loan terms range from one to five years or up to 15 years for the purchase of a principal residence. Participants can only have one loan outstanding at any time. The loans are secured by the balance in the participant's account and bear interest at a fixed rate commensurate with the Plan's prevailing rates at the time the loan is approved. Principal and interest are paid ratably through payroll deductions.

Payment of Benefits – Upon retirement or separation from service with the Employers, the participant may elect to receive a single lump-sum cash payment. Also, upon reaching age 59½, participants may receive a lump-sum cash payment for any portion of their vested accounts on a yearly basis. Until a participant actually retires from the employment of the participant's employer, the participant shall continue to be treated in all respects as a participant.

Hardship Withdrawal – A participant can withdraw from the Plan, part or all of the participant's contributions for a financial hardship. The Trustees shall determine what portion of all of such account balance is necessary to alleviate the hardship. A financial hardship must be one of the reasons specified below:

- 1. Medical expense incurred by the participant, the participant's spouse, or any dependents of the participant;
- 2. The purchase (excluding mortgage payments) of a principal residence of a participant;
- 3. Certain educational expenses for the participant, his or her spouse, or dependents of the participant;
- 4. The need to prevent the eviction of the participant from his or her principal residence or foreclosure on the mortgage of his or her principal residence; or
- 5. Other events as may be prescribed by the Internal Revenue Service Commissioner in revenue rulings, notices, and other documents of general applicability.

Forfeited Accounts – As of December 31, 2009 and 2008, forfeited non-vested accounts were \$8,637 and \$703, respectively. These accounts can be used to reduce future company discretionary and/or matching contributions or to pay for plan expenses. During the year ended December 31, 2009, \$700 was paid from non-vested accounts for Plan expenses.

#### NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES AND OTHER MATTERS

Date of Management Review – Subsequent events were evaluated through October 11, 2010, which is the date the financial statements were available to be issued.

Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting, except that benefits are recorded when paid.

Use of Estimates – The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of additions and deductions to net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Withdrawals and Exchanges – Withdrawals and exchanges between investment fund options by participants are recorded based upon the specific proceeds and cost of the investment at the date of withdrawal or exchange.

Investments – Investments in mutual funds (registered investment companies) are reflected in the financial statements at fair value, using quoted market prices. Unrealized gains or losses as a result of changes in market value are recorded in income of the current period. Participant loans are stated at historical costs.

Administrative Expenses – Certain Plan administrative expenses are paid by the Plan Sponsor. Individual account administrative fees are paid by the participants.

#### NOTE 3 - INVESTMENTS

The fair market values of individual assets that represent 5% or more of the Plan net assets are as follows:

	December 31,		
	2009		
	<b>#200</b> 200	\$000 CCT	
Fidelity Freedom 2010	\$280,399	\$229,557	
Fidelity Freedom 2020	158,443	94,980	
Fidelity Freedom 2025	404,446	296,091	
Fidelity Freedom 2030	145,554	85,460	
Fidelity Money Market Trust	208,303	210,751	
Fidelity Strategic Income	222,349	146,299	

## NOTE 4 - FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described as follows:

- Level 1 inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 inputs to the valuation methodology include the following:
  - Quoted prices for similar assets or liabilities in active markets.
  - Quoted prices for identical or similar assets or liabilities in inactive markets.
  - Inputs other than quoted prices that are observable for the asset or liability.
  - Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

• Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2008.

Mutual funds: Valued at the net asset value (NAV) of shares held by the Plan at year end.

Participant loans: Valued at amortized cost, which approximates fair value.

#### NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

	Fair Value	Measurements at Quoted Prices	Reporting Date	<u>Using:</u>
		In Active Markets for Identical Assets	Significant Other Observable Inputs	Significant Unobservable Inputs
December 31, 2009	Fair Value	<u>(Level I)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Shares of registered investment companies	\$1,763,792	\$1,763,792		
Participant loans Totals	<u>31,965</u> \$1,795,757	\$1,763,792	<u>\$0</u>	<u>\$31,965</u> <u>\$31,965</u>
December 31, 2008 Shares of registered investment				
companies	\$1,268,246	\$1,268,246		<b>\$</b> <0.500
Participant loans Totals	<u>69,593</u> <u>\$1,337,839</u>	\$1,268,246	<u>\$0</u>	<u>\$69,593</u> <u>\$69,593</u>

The table below sets forth a summary of changes in the fair market value of the Plan's Level 3 investment assets for the years ended December 31, 2009 and 2008:

	Participant Loans
Balance, July 1, 2008	\$ 0
Purchases, sales, issuances,	
settlements, and maturities, net	<u>69,593</u>
Balance, December 31, 2008	69,593
Purchases, sales, issuances,	
settlements, and maturities, net	<u>(37,628</u> )
Balance, December 31, 2009	<u>\$31,965</u>

# NOTE 5 - TAX STATUS

Although the Plan has not requested determination from the Internal Revenue Service as the Plan's tax-exempt status, the master prototype plan from which the Plan was drafted has received a favorable determination from the Internal Revenue Service. Plan management believes the Plan is designed to operate in accordance with all applicable provisions of the Internal Revenue Service Code. Therefore, management believes that the Plan is qualified and that the related trust is exempt from taxation under the Internal Revenue Code.

#### NOTE 6 - INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity, the trustee of the Plan, has certified to the completeness and accuracy of all investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, respectively, and the supplemental Schedule H-line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2009 and 2008.

#### NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Fidelity provides certain administrative services to the Plan. Fidelity is also the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for administrative services were \$1,905 for the year ended December 31, 2009 and \$175 for the period from inception, July 1, 2008, to December 31, 2008.

#### NOTE 8 - PLAN TERMINATION

Although they have not expressed any intent to do so, the Employers have the right under the Plan to discontinue their contributions at any time. In addition, although they have not expressed any intent to do so, the Trustees have the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

#### NOTE 9 - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

SUPPLEMENTAL SCHEDULE

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN EIN: 59-0909335 - PLAN NO. 001 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2009

(e)

	Description		Current Value
	Baron Funds:	Growth	\$ 877
	Columbia Funds:	Value & Restructuring	27,632
*	Fidelity Funds	Capital & Income	14,725
		Emerging Markets	18,552
		Freedom Income	37,730
		Freedom 2000	778
		Freedom 2005	49,892
		Freedom 2010	280,399
		Freedom 2015	37,454
		Freedom 2020	158,443
		Freedom 2025	404,446
		Freedom 2030	145,554
		Freedom 2035	4,502
		Freedom 2040	772
		Freedom 2045	67
		Freedom 2050	27,134
		International Discovery	10,485
		Leveraged Stock	14,120
		Money Market Trust	208,303
		Small Cap Growth	14,079
		Spartan U.S. Equity Index	857
		Strategic Income	222,349
	Janus Funds:	Forty	867
		Overseas	4,701
	Keeley Funds:	Small Cap Value	898
	Pimco Funds:	Total Return	78,176
*	Participant Loans	6.00 % to 9.25%	31,965
	TOTAL INVESTMEN	VTS	<u>\$1,795,757</u>

\* Represents a party-in-interest.

(b) and (c)

(a)

See accompanying independent auditors' report.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN EIN: 59-0909335 - PLAN NO. 001 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2008

(a)	(b) and (c)		(e)
	Description		Current Value
	Columbia Funds:	Value & Restructuring	\$ 18,332
*	Fidelity Funds:	Freedom 2000	21
		Freedom 2005	37,816
		Freedom 2010	229,557
		Freedom 2015	60,178
		Freedom 2020	94,980
		Freedom 2025	296,091
		Freedom 2030	85,460
		Freedom 2035	3,274
		Freedom 2040	2,496
		Freedom 2045	1,131
		Freedom 2050	11,402
		Money Market Trust	210,751
		Strategic Income	146,299
	Janus Funds:	Adviser International Growth	1,909
	Pimco Funds:	Total Return	68,549
*	Participant Loans	6.25% to 9.25%	69,593
		Ima	\$1.00 <b>7</b> .000

TOTAL INVESTMENTS

<u>\$1,337,839</u>

\* Represents a party-in-interest.

See accompanying independent auditors' report.

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 3.

File With IRS Only

#### Part I Identification

Name of filer, plan administrator, or plan sponsor (see instructions)				s).
Number, street, and room or suite no. (If a P.O. box, see instructions)				
City or town, state, and ZIP code	Social securit	y number (SSN)		
Plan name	Plan Plan year ending—		g—	
	number	MM	DD	ΥΥΥΥ
1				
2				
3				
	Number, street, and room or suite no. (If a P.O. box, see instructions)	Number, street, and room or suite no. (If a P.O. box, see instructions)	Number, street, and room or suite no. (If a P.O. box, see instructions) <ul> <li>Employer identification number</li> <li>Social security number (SSN)</li> </ul> <ul> <li>Plan name</li> <li>Plan number</li> <li>MM</li> </ul> <ul> <li>Plan name</li> <li>Image: Number identification number</li> <li>Image: Non-state identification number identification number</li> <li>Image: Non-state identification number identification number</li> </ul> <ul> <li>Plan name</li> <li>Image: Non-state identification number identification number</li> <li>Image: Non-state identification number</li> <li>Image: No</li></ul>	Number, street, and room or suite no. (If a P.O. box, see instructions) <ul> <li>Employer identification number (EIN).</li> <li>Social security number (SSN)</li> <li>Image: Social security number (SSN)</li></ul>

#### Part II Extension of Time to File Form 5500 or Form 5500-EZ (see instructions)

1 I request an extension of time until \_\_\_\_\_/ to file Form 5500 or Form 5500-EZ.

The application **is automatically approved** to the date shown on line 1 (above) if: (a) the Form 5558 is filed on or before the normal due date of Form 5500 or 5500-EZ for which this extension is requested, and (b) the date on line 1 is no more than  $2\frac{1}{2}$  months after the normal due date.

You must attach a copy of this Form 5558 to each Form 5500 and 5500-EZ filed after the due date for the plans listed in C above.

Note. A signature is not required if you are requesting an extension to file Form 5500 or Form 5500-EZ.

#### Part III Extension of Time to File Form 5330 (see instructions)

2	I request an extension of time until/ / to file Form 5330. You may be approved for up to a six (6) month extension to file Form 5330, after the normal due date of Form 5330.
а	Enter the Code section(s) imposing the tax
b	Enter the payment amount attached
с 3	For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Date >

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

AND INDEPENDENT AUDITORS' REPORT

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN TABLE OF CONTENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

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Statement of Changes in Net Assets Available for Benefits	3			
Notes to Financial Statements	4 - 9			
SUPPLEMENTAL SCHEDULE				
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Schedule of H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2008	11			



#### **Certified Public Accountants and Consultants**

Irving L. Goldstein, CPA, PA David B. Zugman, CPA, PA Frederick S. Weinstein, CPA, PA Keenan L. Poole, CPA, PA David B. Black, CPA, PA Steven M. Borisman, CPA, PA George F. Horvath, CPA, PA Geraldine (Dee Dee) Poole, CPA Christopher Parsotan, CPA Adele R. Shea, CPA Barbara Gayle, CPA Michael Preville, CPA 701 West Cypress Creek Road Suite 300 Fort Lauderdale, FL 33309 Broward 954.351.9000 Palm Beach 561.393.0411 Miami-Dade 305.947.7717 Fax 954.351.9011 admin@gzwpcpa.com

October 11, 2010

#### INDEPENDENT AUDITORS' REPORT

To the Trustees of The Employees 401(k) Retirement Savings Plan Fort Lauderdale, Florida

We were engaged to audit the financial statements of The Employees 401(k) Retirement Savings Plan as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and for the period from inception, July 1, 2008, to December 31, 2008, and the supplemental schedules as of December 31, 2009 and 2008 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Fidelity Management Trust Company ("Fidelity"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Wenster Doole, JJC Wirran. GOLDSTEIN, ZUGMAN,

WEINSTEIN & POOLE, LLC

Page 1

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	As of December 31,	
	2009	2008
ASSETS		
Investments At Fair Value:		
Shares of registered investment companies	\$1,763,792	\$1,268,246
Participant loans	31,965	<u>69,593</u>
Total Investments	1,795,757	1,337,839
Receivables:		
Participants' contributions	0	2,181
Employers' contributions	33,821	<u>36,777</u>
Total Receivables	33,821	38,958
TOTAL ASSETS	1,829,578	1,376,797
LIABILITIES		
	0 (20	0
Other payables	2,630	0
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2009	For the Period From Inception, July 1, 2008 Through December 31, 2008
ADDITIONS/(SUBTRACTIONS) TO NET ASSETS ATTRIBUTED TO:		
Investment Income/(Loss): Net appreciation/(depreciation) of fair value of investments Dividends Interest from participant loans Other interest Total Investment Income/(Loss)	\$ 279,619 50,617 3,972 <u>1,343</u> <u>335,551</u>	$\begin{array}{c} \$ (371,895) \\ 38,918 \\ 3,223 \\ \underline{1,343} \\ (328,411) \end{array}$
Contributions: Participants Employer match Total Contributions Total Additions/(Subtractions)	121,375 <u>33,821</u> <u>155,196</u> <u>490,747</u>	62,573 $36,777$ $99,350$ $(229,061)$
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants Administrative expenses	133,227 1,905	81,848 175
Total Deductions	135,132	82,023
Increase/(Decrease) Before Transfers	355,615	(311,084)
Plan Transfers In	94,536	1,687,881
NET INCREASE	450,151	1,376,797
Net Assets Available For Benefits – Beginning of Year	<u>1,376,797</u>	0
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

### NOTE 1 - DESCRIPTION OF THE PLAN

The following description of The Employees 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement and amendments for a more complete description of the Plan's provisions.

General – The employees of B&L Service, Inc. and its related entities were initially participants in the multi-employer AequiCap Employer Services Retirement Savings Plan. Effective July 1, 2008, B&L Service, Inc. and its related entities terminated their participation in the AequiCap Employer Services Retirement Savings Plan and transferred their assets to their successor stand-alone plan sponsored by B&L Service, Inc. (the "Plan Sponsor").

Eligibility – The Plan covers all employees, as defined in the Plan, who have completed six months of service and attained the age of 18.

Employee Contributions – Participants may elect to contribute from 1% to 90% of their pre-tax compensation, after-tax compensation (Roth contribution), or any combination thereof for the years ended December 31, 2009 and 2008, as defined in the Plan, up to a maximum of \$16,500 and \$15,500, respectively. Participants who have attained age 50 during the Plan year may make an elective deferral contribution of \$5,500 and \$5,000 during 2009 and 2008, respectively. The percentage may be changed as of any subsequent Plan entry date. Any such change will apply only after its effective date, and after it is executed and filed with the Plan Administrator. Fund allocations may be changed by the participants at any time.

Employer Contributions – The discretionary employer-provided matching contribution for the years ended December 31, 2009 and 2008 was 50% of the participant's elective deferral up to a maximum of 3% of their qualified wages.

The total of employer and employee contributions, per participant, is limited to the lesser of \$49,000 and \$46,000 for the years ended December 31, 2009 and 2008, respectively, or 100% of the participant's eligible pre-tax compensation for the year.

Participant Accounts – Each participant's account is credited with the participant's contribution and employer-provided matching contributions, Plan earnings, and charged with management or service fees. Allocations are based on participant earnings or account balances, as defined by the Plan. Additional administrative fees are charged by the custodian upon fund withdrawal. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participant contributions are 100% vested. Discretionary employer-provided matching contributions are 20% vested after two years of service and 20% for each additional year of service. Automatic 100% vesting occurs upon attainment of normal retirement age (65), upon retirement due to disability, upon death, and upon termination of the Plan.

A year of service for vesting purposes is obtained upon each participant's employment anniversary date.

# NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Investment Options – Participants may direct contributions in 1% increments to any of the investment options offered by the Plan. The investment options include money market funds and various mutual funds. The fund values are computed daily by the custodians and reflect changes in the unit values of the investments.

Participant Loans – Participants can borrow up to 50% from the vested balance of their fund account with a minimum of \$1,000 up to a maximum of \$50,000. Loan terms range from one to five years or up to 15 years for the purchase of a principal residence. Participants can only have one loan outstanding at any time. The loans are secured by the balance in the participant's account and bear interest at a fixed rate commensurate with the Plan's prevailing rates at the time the loan is approved. Principal and interest are paid ratably through payroll deductions.

Payment of Benefits – Upon retirement or separation from service with the Employers, the participant may elect to receive a single lump-sum cash payment. Also, upon reaching age 59½, participants may receive a lump-sum cash payment for any portion of their vested accounts on a yearly basis. Until a participant actually retires from the employment of the participant's employer, the participant shall continue to be treated in all respects as a participant.

Hardship Withdrawal – A participant can withdraw from the Plan, part or all of the participant's contributions for a financial hardship. The Trustees shall determine what portion of all of such account balance is necessary to alleviate the hardship. A financial hardship must be one of the reasons specified below:

- 1. Medical expense incurred by the participant, the participant's spouse, or any dependents of the participant;
- 2. The purchase (excluding mortgage payments) of a principal residence of a participant;
- 3. Certain educational expenses for the participant, his or her spouse, or dependents of the participant;
- 4. The need to prevent the eviction of the participant from his or her principal residence or foreclosure on the mortgage of his or her principal residence; or
- 5. Other events as may be prescribed by the Internal Revenue Service Commissioner in revenue rulings, notices, and other documents of general applicability.

Forfeited Accounts – As of December 31, 2009 and 2008, forfeited non-vested accounts were \$8,637 and \$703, respectively. These accounts can be used to reduce future company discretionary and/or matching contributions or to pay for plan expenses. During the year ended December 31, 2009, \$700 was paid from non-vested accounts for Plan expenses.

### NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES AND OTHER MATTERS

Date of Management Review – Subsequent events were evaluated through October 11, 2010, which is the date the financial statements were available to be issued.

Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting, except that benefits are recorded when paid.

Use of Estimates – The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of additions and deductions to net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Withdrawals and Exchanges – Withdrawals and exchanges between investment fund options by participants are recorded based upon the specific proceeds and cost of the investment at the date of withdrawal or exchange.

Investments – Investments in mutual funds (registered investment companies) are reflected in the financial statements at fair value, using quoted market prices. Unrealized gains or losses as a result of changes in market value are recorded in income of the current period. Participant loans are stated at historical costs.

Administrative Expenses – Certain Plan administrative expenses are paid by the Plan Sponsor. Individual account administrative fees are paid by the participants.

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The fair market values of individual assets that represent 5% or more of the Plan net assets are as follows:

	December 31,	
	2009	2008
	<b>#200</b> 200	\$000 CCT
Fidelity Freedom 2010	\$280,399	\$229,557
Fidelity Freedom 2020	158,443	94,980
Fidelity Freedom 2025	404,446	296,091
Fidelity Freedom 2030	145,554	85,460
Fidelity Money Market Trust	208,303	210,751
Fidelity Strategic Income	222,349	146,299

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Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described as follows:

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  - Quoted prices for similar assets or liabilities in active markets.
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  - Inputs other than quoted prices that are observable for the asset or liability.
  - Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

• Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2008.

Mutual funds: Valued at the net asset value (NAV) of shares held by the Plan at year end.

Participant loans: Valued at amortized cost, which approximates fair value.

### NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

	Fair Value Measurements at Reporting Date Using: Quoted Prices			
		In Active Markets for Identical Assets	Significant Other Observable Inputs	Significant Unobservable Inputs
December 31, 2009	Fair Value	<u>(Level I)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Shares of registered investment companies	\$1,763,792	\$1,763,792		
Participant loans Totals	<u>31,965</u> \$1,795,757	\$1,763,792	<u>\$0</u>	<u>\$31,965</u> <u>\$31,965</u>
December 31, 2008 Shares of registered investment				
companies	\$1,268,246	\$1,268,246		<b>\$</b> <0.500
Participant loans Totals	<u>69,593</u> <u>\$1,337,839</u>	\$1,268,246	<u>\$0</u>	<u>\$69,593</u> <u>\$69,593</u>

The table below sets forth a summary of changes in the fair market value of the Plan's Level 3 investment assets for the years ended December 31, 2009 and 2008:

	Participant Loans
Balance, July 1, 2008	\$ 0
Purchases, sales, issuances,	
settlements, and maturities, net	<u>69,593</u>
Balance, December 31, 2008	69,593
Purchases, sales, issuances,	
settlements, and maturities, net	<u>(37,628</u> )
Balance, December 31, 2009	<u>\$31,965</u>

# NOTE 5 - TAX STATUS

Although the Plan has not requested determination from the Internal Revenue Service as the Plan's tax-exempt status, the master prototype plan from which the Plan was drafted has received a favorable determination from the Internal Revenue Service. Plan management believes the Plan is designed to operate in accordance with all applicable provisions of the Internal Revenue Service Code. Therefore, management believes that the Plan is qualified and that the related trust is exempt from taxation under the Internal Revenue Code.

### NOTE 6 - INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity, the trustee of the Plan, has certified to the completeness and accuracy of all investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, respectively, and the supplemental Schedule H-line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2009 and 2008.

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Fidelity provides certain administrative services to the Plan. Fidelity is also the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for administrative services were \$1,905 for the year ended December 31, 2009 and \$175 for the period from inception, July 1, 2008, to December 31, 2008.

### NOTE 8 - PLAN TERMINATION

Although they have not expressed any intent to do so, the Employers have the right under the Plan to discontinue their contributions at any time. In addition, although they have not expressed any intent to do so, the Trustees have the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

### NOTE 9 - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

SUPPLEMENTAL SCHEDULE

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN EIN: 59-0909335 - PLAN NO. 001 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2009

(e)

	Description		Current Value
	Baron Funds:	Growth	\$ 877
	Columbia Funds:	Value & Restructuring	27,632
*	Fidelity Funds	Capital & Income	14,725
		Emerging Markets	18,552
		Freedom Income	37,730
		Freedom 2000	778
		Freedom 2005	49,892
		Freedom 2010	280,399
		Freedom 2015	37,454
		Freedom 2020	158,443
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		Freedom 2050	27,134
		International Discovery	10,485
		Leveraged Stock	14,120
		Money Market Trust	208,303
		Small Cap Growth	14,079
		Spartan U.S. Equity Index	857
		Strategic Income	222,349
	Janus Funds:	Forty	867
		Overseas	4,701
	Keeley Funds:	Small Cap Value	898
	Pimco Funds:	Total Return	78,176
*	Participant Loans	6.00 % to 9.25%	31,965
	TOTAL INVESTMEN	VTS	<u>\$1,795,757</u>

\* Represents a party-in-interest.

(b) and (c)

(a)

See accompanying independent auditors' report.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN EIN: 59-0909335 - PLAN NO. 001 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2008

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	Columbia Funds:	Value & Restructuring	\$ 18,332
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		Freedom 2005	37,816
		Freedom 2010	229,557
		Freedom 2015	60,178
		Freedom 2020	94,980
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		Money Market Trust	210,751
		Strategic Income	146,299
	Janus Funds:	Adviser International Growth	1,909
	Pimco Funds:	Total Return	68,549
*	Participant Loans	6.25% to 9.25%	69,593
		100.0	\$1.00 <b>7</b> .000

TOTAL INVESTMENTS

<u>\$1,337,839</u>

\* Represents a party-in-interest.

See accompanying independent auditors' report.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

AND INDEPENDENT AUDITORS' REPORT

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN TABLE OF CONTENTS AS OF DECEMBER 31, 2009 AND 2008 AND FOR THE YEAR ENDED DECEMBER 31, 2009 AND THE PERIOD FROM INCEPTION, JULY 1, 2008 THROUGH DECEMBER 31, 2008

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#### **Certified Public Accountants and Consultants**

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October 11, 2010

### INDEPENDENT AUDITORS' REPORT

To the Trustees of The Employees 401(k) Retirement Savings Plan Fort Lauderdale, Florida

We were engaged to audit the financial statements of The Employees 401(k) Retirement Savings Plan as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and for the period from inception, July 1, 2008, to December 31, 2008, and the supplemental schedules as of December 31, 2009 and 2008 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Fidelity Management Trust Company ("Fidelity"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Wenster Doole, JJC Wirran. GOLDSTEIN, ZUGMAN,

WEINSTEIN & POOLE, LLC

Page 1

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	As of December 31,	
	2009	2008
ASSETS		
Investments At Fair Value:		
Shares of registered investment companies	\$1,763,792	\$1,268,246
Participant loans	31,965	<u>69,593</u>
Total Investments	1,795,757	1,337,839
Receivables:		
Participants' contributions	0	2,181
Employers' contributions	33,821	<u>36,777</u>
Total Receivables	33,821	38,958
TOTAL ASSETS	1,829,578	1,376,797
LIABILITIES		
	0 (20	0
Other payables	2,630	0
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2009	For the Period From Inception, July 1, 2008 Through December 31, 2008
ADDITIONS/(SUBTRACTIONS) TO NET ASSETS ATTRIBUTED TO:		
Investment Income/(Loss): Net appreciation/(depreciation) of fair value of investments Dividends Interest from participant loans Other interest Total Investment Income/(Loss)	\$ 279,619 50,617 3,972 <u>1,343</u> <u>335,551</u>	$\begin{array}{c} \$ (371,895) \\ 38,918 \\ 3,223 \\ \underline{1,343} \\ (328,411) \end{array}$
Contributions: Participants Employer match Total Contributions Total Additions/(Subtractions)	121,375 <u>33,821</u> <u>155,196</u> <u>490,747</u>	62,573 $36,777$ $99,350$ $(229,061)$
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants Administrative expenses	133,227 1,905	81,848 175
Total Deductions	135,132	82,023
Increase/(Decrease) Before Transfers	355,615	(311,084)
Plan Transfers In	94,536	1,687,881
NET INCREASE	450,151	1,376,797
Net Assets Available For Benefits – Beginning of Year	<u>1,376,797</u>	0
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	<u>\$1,826,948</u>	<u>\$1,376,797</u>

The accompanying notes are an integral part of these financial statements.

### NOTE 1 - DESCRIPTION OF THE PLAN

The following description of The Employees 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement and amendments for a more complete description of the Plan's provisions.

General – The employees of B&L Service, Inc. and its related entities were initially participants in the multi-employer AequiCap Employer Services Retirement Savings Plan. Effective July 1, 2008, B&L Service, Inc. and its related entities terminated their participation in the AequiCap Employer Services Retirement Savings Plan and transferred their assets to their successor stand-alone plan sponsored by B&L Service, Inc. (the "Plan Sponsor").

Eligibility – The Plan covers all employees, as defined in the Plan, who have completed six months of service and attained the age of 18.

Employee Contributions – Participants may elect to contribute from 1% to 90% of their pre-tax compensation, after-tax compensation (Roth contribution), or any combination thereof for the years ended December 31, 2009 and 2008, as defined in the Plan, up to a maximum of \$16,500 and \$15,500, respectively. Participants who have attained age 50 during the Plan year may make an elective deferral contribution of \$5,500 and \$5,000 during 2009 and 2008, respectively. The percentage may be changed as of any subsequent Plan entry date. Any such change will apply only after its effective date, and after it is executed and filed with the Plan Administrator. Fund allocations may be changed by the participants at any time.

Employer Contributions – The discretionary employer-provided matching contribution for the years ended December 31, 2009 and 2008 was 50% of the participant's elective deferral up to a maximum of 3% of their qualified wages.

The total of employer and employee contributions, per participant, is limited to the lesser of \$49,000 and \$46,000 for the years ended December 31, 2009 and 2008, respectively, or 100% of the participant's eligible pre-tax compensation for the year.

Participant Accounts – Each participant's account is credited with the participant's contribution and employer-provided matching contributions, Plan earnings, and charged with management or service fees. Allocations are based on participant earnings or account balances, as defined by the Plan. Additional administrative fees are charged by the custodian upon fund withdrawal. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participant contributions are 100% vested. Discretionary employer-provided matching contributions are 20% vested after two years of service and 20% for each additional year of service. Automatic 100% vesting occurs upon attainment of normal retirement age (65), upon retirement due to disability, upon death, and upon termination of the Plan.

A year of service for vesting purposes is obtained upon each participant's employment anniversary date.

# NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Investment Options – Participants may direct contributions in 1% increments to any of the investment options offered by the Plan. The investment options include money market funds and various mutual funds. The fund values are computed daily by the custodians and reflect changes in the unit values of the investments.

Participant Loans – Participants can borrow up to 50% from the vested balance of their fund account with a minimum of \$1,000 up to a maximum of \$50,000. Loan terms range from one to five years or up to 15 years for the purchase of a principal residence. Participants can only have one loan outstanding at any time. The loans are secured by the balance in the participant's account and bear interest at a fixed rate commensurate with the Plan's prevailing rates at the time the loan is approved. Principal and interest are paid ratably through payroll deductions.

Payment of Benefits – Upon retirement or separation from service with the Employers, the participant may elect to receive a single lump-sum cash payment. Also, upon reaching age 59½, participants may receive a lump-sum cash payment for any portion of their vested accounts on a yearly basis. Until a participant actually retires from the employment of the participant's employer, the participant shall continue to be treated in all respects as a participant.

Hardship Withdrawal – A participant can withdraw from the Plan, part or all of the participant's contributions for a financial hardship. The Trustees shall determine what portion of all of such account balance is necessary to alleviate the hardship. A financial hardship must be one of the reasons specified below:

- 1. Medical expense incurred by the participant, the participant's spouse, or any dependents of the participant;
- 2. The purchase (excluding mortgage payments) of a principal residence of a participant;
- 3. Certain educational expenses for the participant, his or her spouse, or dependents of the participant;
- 4. The need to prevent the eviction of the participant from his or her principal residence or foreclosure on the mortgage of his or her principal residence; or
- 5. Other events as may be prescribed by the Internal Revenue Service Commissioner in revenue rulings, notices, and other documents of general applicability.

Forfeited Accounts – As of December 31, 2009 and 2008, forfeited non-vested accounts were \$8,637 and \$703, respectively. These accounts can be used to reduce future company discretionary and/or matching contributions or to pay for plan expenses. During the year ended December 31, 2009, \$700 was paid from non-vested accounts for Plan expenses.

### NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES AND OTHER MATTERS

Date of Management Review – Subsequent events were evaluated through October 11, 2010, which is the date the financial statements were available to be issued.

Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting, except that benefits are recorded when paid.

Use of Estimates – The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of additions and deductions to net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Withdrawals and Exchanges – Withdrawals and exchanges between investment fund options by participants are recorded based upon the specific proceeds and cost of the investment at the date of withdrawal or exchange.

Investments – Investments in mutual funds (registered investment companies) are reflected in the financial statements at fair value, using quoted market prices. Unrealized gains or losses as a result of changes in market value are recorded in income of the current period. Participant loans are stated at historical costs.

Administrative Expenses – Certain Plan administrative expenses are paid by the Plan Sponsor. Individual account administrative fees are paid by the participants.

### NOTE 3 - INVESTMENTS

The fair market values of individual assets that represent 5% or more of the Plan net assets are as follows:

	December 31,	
	2009	2008
	<b>#200</b> 200	\$000 CCT
Fidelity Freedom 2010	\$280,399	\$229,557
Fidelity Freedom 2020	158,443	94,980
Fidelity Freedom 2025	404,446	296,091
Fidelity Freedom 2030	145,554	85,460
Fidelity Money Market Trust	208,303	210,751
Fidelity Strategic Income	222,349	146,299

# NOTE 4 - FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described as follows:

- Level 1 inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 inputs to the valuation methodology include the following:
  - Quoted prices for similar assets or liabilities in active markets.
  - Quoted prices for identical or similar assets or liabilities in inactive markets.
  - Inputs other than quoted prices that are observable for the asset or liability.
  - Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

• Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2008.

Mutual funds: Valued at the net asset value (NAV) of shares held by the Plan at year end.

Participant loans: Valued at amortized cost, which approximates fair value.

### NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

	Fair Value Measurements at Reporting Date Using: Quoted Prices			
		In Active Markets for Identical Assets	Significant Other Observable Inputs	Significant Unobservable Inputs
December 31, 2009	Fair Value	<u>(Level I)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Shares of registered investment companies	\$1,763,792	\$1,763,792		
Participant loans Totals	<u>31,965</u> \$1,795,757	\$1,763,792	<u>\$0</u>	<u>\$31,965</u> <u>\$31,965</u>
December 31, 2008 Shares of registered investment				
companies	\$1,268,246	\$1,268,246		<b>\$</b> <0.500
Participant loans Totals	<u>69,593</u> <u>\$1,337,839</u>	\$1,268,246	<u>\$0</u>	<u>\$69,593</u> <u>\$69,593</u>

The table below sets forth a summary of changes in the fair market value of the Plan's Level 3 investment assets for the years ended December 31, 2009 and 2008:

	Participant Loans
Balance, July 1, 2008	\$ 0
Purchases, sales, issuances,	
settlements, and maturities, net	<u>69,593</u>
Balance, December 31, 2008	69,593
Purchases, sales, issuances,	
settlements, and maturities, net	<u>(37,628</u> )
Balance, December 31, 2009	<u>\$31,965</u>

# NOTE 5 - TAX STATUS

Although the Plan has not requested determination from the Internal Revenue Service as the Plan's tax-exempt status, the master prototype plan from which the Plan was drafted has received a favorable determination from the Internal Revenue Service. Plan management believes the Plan is designed to operate in accordance with all applicable provisions of the Internal Revenue Service Code. Therefore, management believes that the Plan is qualified and that the related trust is exempt from taxation under the Internal Revenue Code.

### NOTE 6 - INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity, the trustee of the Plan, has certified to the completeness and accuracy of all investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, respectively, and the supplemental Schedule H-line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2009 and 2008.

### NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Fidelity provides certain administrative services to the Plan. Fidelity is also the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for administrative services were \$1,905 for the year ended December 31, 2009 and \$175 for the period from inception, July 1, 2008, to December 31, 2008.

### NOTE 8 - PLAN TERMINATION

Although they have not expressed any intent to do so, the Employers have the right under the Plan to discontinue their contributions at any time. In addition, although they have not expressed any intent to do so, the Trustees have the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

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SUPPLEMENTAL SCHEDULE

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(b) and (c)

(a)

See accompanying independent auditors' report.

# THE EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN EIN: 59-0909335 - PLAN NO. 001 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2008

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TOTAL INVESTMENTS

<u>\$1,337,839</u>

\* Represents a party-in-interest.

See accompanying independent auditors' report.