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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 313994

THE B.D.M. FINANCIAL CORPORATION

Principal Place of Business
2601 BISCAYNE BLVD P.O. BOX 370308 MIAMI FL 33137

Mailing Address

2601 BISCAYNE BLVD

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90164 030 ***150.00



P.O. BOX 37030 MIAMI FL 3313			P.O. BOX 370308 MIAMI FL 33137						DO NOT WRITE IN THIS SPACE							
MICHIE I COTO	•				••					3. Date Inco	orporated o	or Qualifed	1			
										02/21/	1967					
2. Principal Place of Business				2a. Mailing Address						4. FEI Number					Apı	lied For
21				26						59-123	3970				Not	Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					L.	5. Certifcate		Desired		•		dditional
				27						D. OCHROCK					ee Re	quired
City & State				City & State						6. Election		_				May Be
23			28	· · · · · · · · · · · · · · · · · · ·							nd Contribu				dded to	Fees
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	9. Name and	Address of Current	t Regi	stered Age	nt_	81	Г	Name	!	u. Name ar	IU AUUIUS	S OI NEW	Registere	u Ayeri		
POD	DICHET ANTO	ONIO				"		14ame								
RODRIGUEZ, ANTONIO 2601 BISCAYNE BLVD								Street Ac	et Address (P.O. Box Number is Not Acceptable)							
	/II FL 33137	Liu				83	+									
MIT	NI FE 33 137					03							_			
						84		City					F	85	Zip C	ode
11 Burguant	to the provisions	of Sections 607 0503	2 and (607 1508 F	lorida Statutes	the abov	 e-r	named co	orporat	tion submits	this statem	ent for the			ing its	registered
office or re agent. I a	egistered agent, m familiar with, a	of Sections 607.0502 or both, in the State o and accept the obligat	of Flori	nda. Such ch of, Section 60	nange was autl 07.0505, Florid	norized by la Statutes	th	ne corpora	ation's	board of dire	ectors. I he	ereby acce	ept the app	ointmen	t as reg	jistered
SIGNATURE													DATE			
	Signature, typed or pr	inted name of registered agen OFFICERS AN			(NOTE: R	egistered Age	nt s	signature requ	uired whe	an reinstating) ADDITION	IS/CHANG	ES TO O		AND DIE	RECTO	RS IN 12
12.	20	OFFICERS AN	אוט ט		DELETE	1.1 TITLE				ADDITION	OICHAIRC	,L3 10 01	THOLINO		hange	Addition
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CITY-ST-ZIP	ı					_ J., J., I., I.										

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/27/99