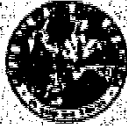


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995, UNLESS YOU FILE AN AMENDMENT TO THIS REPORT ON OR BEFORE 6/30/95. SEE (IF APPLICABLE) DISBURSED ACCOUNT DUE TO REGISTRY: (377)

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northing  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

1995 JUL 11 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F94000005692 (8)

1. Corporation Name

BHP CONSULTANTS, INC.

Principal Place of Business  
3460 NORTH KEY DRIVE, UNIT 108E  
NORTH FT MYERS FL 33903

Mailing Address  
3460 NORTH KEY DRIVE, UNIT 108E  
NORTH FT MYERS FL 33903

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/02/1994	3a. Date of Last Report
4. FEI Number 16-1445869	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 109.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
24 Zip	25 Country
28 Zip	29 Country

9. Name and Address of Current Registered Agent

BRUCE H. PETERSON  
3460 N. KEY DRIVE  
N. FT MYERS FL 33903

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: July 06/95

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	PETERSON, BRUCE H
STREET ADDRESS	3460 N. KEY DRIVE
CITY - ST - ZIP	N. FT. MYERS FL
TITLE	\$
NAME	LAWRENCE, LOIS J
STREET ADDRESS	16 CHERRY STREET
CITY - ST - ZIP	ST CATHERINES, ONTARIO CANA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3460 N. KEY DRIVE, UNIT 108E
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LAWRENCE, LOIS J
2.3 STREET ADDRESS	ST CATHARINES
2.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: *[Signature]* Name: Bruce H Peterson Date: July 06/95 Telephone # 941-437-1733

CR2E034 (3/95)