

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J60298 (3)
1. Corporation Name
BEMOCO CONSOLIDATED, INC.



Principal Place of Business: **4801 S. UNIVERSITY DR. SUITE #305 DAVIE FL 33328 US**
Mailing Address: **2269 S. UNIVERSITY DR. SUITE 106 DAVIE FL 33324**

3. Date Incorporated or Qualified: **02/23/1987**
3a. Date of Last Report: **04/11/1995**
4. FEI Number: **65-0001081**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent: **SIROTA, BEVERLY MORGAN 3659 CITRUS TRACE DAVIE FL 33328**
10. Name and Address of New Registered Agent: **81 Name: SIROTA, BEVERLY MORGAN 82 Street Address (P.O. Box Number is Not Acceptable): 3659 CITRUS TRACE DAVIE FL 33328 84 City: DAVIE FL 85 Zip Code: 33328**

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: _____ (NOTE: Registered Agent signature required when reinstating.) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SIROTA, BEVERLY MORGAN	
STREET ADDRESS	3659 CITRUS TRACE	
CITY-ST-ZIP	DAVIE FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	KRIETE, KATHLEEN	
STREET ADDRESS	10100 N.W. 14TH ST.	
CITY-ST-ZIP	PLANTATION FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	SIROTA, DIANE	
STREET ADDRESS	12471 SW 11 CT	
CITY-ST-ZIP	DAVIE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kriete, Kathleen	
1.3 STREET ADDRESS	10100 NW 14th St	
1.4 CITY-ST-ZIP	Plantation FL 33322	
2.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Kriete Thelma	
2.3 STREET ADDRESS	10111 NW 24th Place Bldg 197 Apt 306	
2.4 CITY-ST-ZIP	Sunrise 33322	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 119.07(3)(k), 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: Diane Sirota (Diane SIROTA) Date: 4/22/96 Daytime Phone #: 954 680-9300

CR2E034 (12/95)