## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26165

(3)

THE BRIDGE INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address					T LEGARIO SIO HOLO DILOT HIGH DILOT		<b>1</b> 11	#11
C/O RAGNHILD KJELDAAS ULRICH 201 S. W. 38TH AVE FT. LAUDERDALE FL 33312		C/O RAGNHILD KJELDAAS ULRICH 201 S. W. 38TH AVE FT. LAUDERDALE FL 33312-1864								
							3. Date incorporated or Qualified 04/28/1988	3a, D	ate of Last F 05/09/19	₹eport <b>}96</b>
<del>-</del>	ace of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied For Not Applied For				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.								lot Applicable Additional
22		27					5. Certificate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing			May Be	
Zip Country		Zip Country				Trust Fund Contribution	Ш		to Fees	
24	25 29 30			irit; y			B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
	9. Name and Address of Current Registered Agent			l			10. Name and Address of New Re			
				81	Name	9				
TOUPIN, WILLIAM				82	Stree	l Addre	ss (P.O. Box Number is Not Acceptal			
	ISTH AVENUE									
PUMPAN	IO BEACH FL 33060			83						
	•			84	City			FL		Code
11. Pursuant t	tes, the al	pove	-name	d corpo	ration submits this statement for the p	ourpose o	f changing	its registered		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered agent	1 when reinstating)	DATE							
12.	OFFICERS AND		13	a Age	nt signa:u	ire required	ADDITIONS/CHANGES TO OFFIC		D DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 Ti	TL€		T			Change	Addition
NAME	ULRICH,RAGNHILD KJELDAAS		1.2 N/	AME						
STREET ADDRESS	201 S.W. 38TH AVE.		1.3 STREET ADDRESS		;					
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CITY-ST-ZIP		Д			TT 41.55	
TITLE			ı	2.1 TITLE		}			Change	Addition
NAME ATREET LEBESSON	BUCK, GEOFFREY				2.3 STREET ADDRESS					
STREET ADDRESS	201 S.W. 38TH AVE. FT. LAUDERDALE FL			2. 4 CITY-ST-ZIP		<b>'</b> ]				
CITY-ST-ZIP TITLE	D DELETE		_	3.1 TITLE		+			Change	Addition
NAME	ALLAN REESOR			ME						_
STREET ADDRESS	2718 ISLAND DRIVE			REET.	ADDRESS	;				
CITY-ST-ZIP	MIRAMAR FL		3.4. C	3.4. CITY-ST-ZIP						. !
TITLE	D	☐ DELETE	4.1 Ti	TLE		T	:		Change	Addition
NAME	HUGH SMITH		4. 2 N	AME			i			
STREET ADDRESS			4.3 S1	4.3 STREET ADDRESS		;				
CITY-ST-ZIP	LIMA NY		4.4 CI	TY-S1	1 - ZIP	<del></del> .				_
TITLE	D	DELETE	5.1 Ti	TLE					Change	Addition
NAME			5.2 N	5.2 NAME						
STREET ADDRESS	**** * * * * * * * * * * * * * * * * *		5.3 S1	5.3 STREET ADDRESS		;				
CITY-ST-ZIP				TY-S1	T - ZIP				<del></del>	F-17.55.
TITLE		☐ DELETE	6.1 Ti			1			L. Change	Addition
NAME .			6.2 N/							
STREET ADDRESS			6.3 \$1	REET.	ADDRESS	; [				

14. I do 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 amuel 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 directors the borporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on any achievement with an address,

15-01 07