

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

FILED  
Apr 10 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000062263 (5)**  
1. Corporation Name  
**B&K EQUIPMENT SUPPLY, INC.**



Principal Place of Business <b>5941 S.W. 36TH TERRACE SUITE A FT. LAUDERDALE FL 33312</b>	Mailing Address <b>5941 S.W. 36TH TERRACE SUITE A FT. LAUDERDALE FL 33312-6238</b>
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2. Principal Place of Business <b>1109 N. 21 AVE #105 Suite, Apt. #, etc. Suite 105 City &amp; State Hollywood Florida Zip 33020</b>	2a. Mailing Address <b>5941 SW 36 Terr. Suite, Apt. #, etc. SUITE A City &amp; State Ft. Lauderdale, FL Zip 33312</b>	25. Country <b>USA</b>	3. Date Incorporated or Qualified <b>08/11/1995</b>	3a. Date of Last Report <b>05/01/1996</b>
22. City & State	27. City & State	29. Zip	4. FEI Number <b>65-0602623</b>	Applied For <input type="checkbox"/> Not Applicable
23. Zip	28. City & State	30. Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
24. Zip	29. Zip	30. Country	6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
25. Country	30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>KEATOR, BARWELL S 5941 S.W. 36TH TERRACE FT. LAUDERDALE FL 33312</b>		10. Name and Address of New Registered Agent		
		81. Name		
		82. Street Address (P.O. Box Number is Not Acceptable)		
		83.		
		84. City	<b>FL</b>	85. Zip Code

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: Barwell S Keator **BARWELL S KEATOR** DATE: **4/7/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KEATOR, BARWELL S</b>		1.2 NAME	
STREET ADDRESS <b>5941 S.W.36TH TERRACE #A</b>		1.3 STREET ADDRESS	
CITY - ST - ZIP <b>FT. LAUDERDALE FL 33312</b>		1.4 CITY - ST - ZIP	
TITLE <b>VP</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>TAYLOR, JANET B</b>		2.2 NAME	
STREET ADDRESS <b>5941 SW 36 TERR</b>		2.3 STREET ADDRESS	
CITY - ST - ZIP <b>FT LAUDERDALE FL</b>		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: Barwell S Keator **BARWELL S KEATOR** DATE: **4/7/97** (954) 963-4094

CR2E034 (9/96)