## 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 # P98000042081

1. Corporation Name

BWPAL INC.

## FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90068 033 \*\*\*150.00



Principal Place of Business Mailing Address 808 SOUTHE'AST 12TH COURT #3 808 SOUTHEAST 12TH COURT #3 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Ir corporated or Qualifed 05/08/1998 Apriled For 2. Principa Place of Business 2a. Mailing Address FEI Number Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & S:ate 6. Electio 1 Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country Country Zip 8. This corporation owes the current year intangible Zin Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ARSCOTT, RICK Street Acdress (P.O. Box Number is Not Acceptable) 82 808 SOUTHEAST 12TH COURT #3 FORT LAUDERDALE FL 33316 83 85 Zip Code 8A City F 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 cirectors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTI:: Registered Agent signature required when reinstating) Signature, typed or printed nai te of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition PD DELETE 1.1 TITLE TITLE ARSCOTT, RICK 1.2 NAME NAME 808 SOUTHEAST 12TH COURT #3 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33316 1 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE DANID SHAW 2.1 TITLE TITLE 4015 N.W 64 H.R.D. 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS BOCA RATON, FL 33496 CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME 8.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 changes or plan attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE.

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)