

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000017650 (0)

B & D INTERNATIONAL AND DOMESTIC SALES INC.

APPROVED
AND
FILED

MAY 22 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business 914 STRATFORD MANOR DRIVE BRANDON FL 33510-2802		2a. Mailing Address 914 STRATFORD MANOR DRIVE BRANDON FL 33510-2802	
2. Principal Place of Business 21	2b. Mailing Address 26	3. Date Incorporated or Quoted 03/08/1994	3a. Date of Last Report 03/08/1994
22. State Apt # etc. 22	27. State Apt # etc. 27	4. FCI Number 59-3134923	Applied For Not Applicable
23. City & State 23	28. City & State 28	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
24. City 24	29. City 29	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
25. County 25	30. County 30	7. This corporation has liability for intangible tax under S. 189.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent VOSS, MURL R 914 STRATFORD MANOR DRIVE BRANDON FL 33510-2802		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL
		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: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	NAME VOSS, MURL R	1.1 TITLE ☐ Change ☐ Addition	
STREET ADDRESS 914 STRATFORD MANOR DRIVE		1.2 NAME	
CITY, ST, ZIP BRANDON FL 33510-2802		1.3 STREET ADDRESS	
		1.4 CITY, ST, ZIP	
TITLE		2.1 TITLE ☐ Change ☐ Addition	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE ☐ Change ☐ Addition	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE ☐ Change ☐ Addition	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE ☐ Change ☐ Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE ☐ Change ☐ 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 report is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(2)(b), Florida Statutes. I further certify that the information indicated on this annual report is applicable to the report as a whole 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 this corporation or its record or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report, or is identical with its address.

SIGNATURE: *Mark Robert Voss*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARK ROBERT VOSS

5-20-95