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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

## FILED Jan 28 1998 8:00am Secretary of State

L	1990	DIVIDION OF		⇒ Secretary C	n State
DOCUMENT # 399530 (5)					
BUGD/	AL GROUP, INC.				
Principal Plac	e of Business	Mailing Address		r read intig this later that the state of th	1; =1#1; #1#11 #1#11 #1#11 #1#1
7314 S.W. 48		7314 S.W. 48 ST.			
MIAMIFL 33 US	155-5523	MIAMI FL 33155-5523 US		DO NOT WRITE IN THIS	SPACE
03		03		3. Date Incorporated or Qualified	
•				04/19/1972	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	- Applied For
21		26		59-1414962	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27					Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
<b>Z</b> ip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol> <li>This corporation owes or has paid the cu Personal Property Tax due June 30.</li> </ol>	irrent year Intangible ☐ Yes ☐ No
24	9. Name and Address of Curren		1301	10. Name and Address of New Registered	
BU	JGDAL,RICHARD H		81 Name		
7314 S.W. 48 ST.			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	·
PA I	AMI FL 33155		83		
			84 City		85 Zip Code
				FL	_
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.	Signature, typed or printed name of registered ager OFFICERS AND		TE. Registered Agent signature requ	Ired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 12
TITLE	VP OFFICERS AND	DELETE	1,1 TITLE	ADDITIONO/OFFANGED TO OFFICE IS AN	Change Addition
NAME	BUGDAL.RICHARD	<b>—</b>	1.2 NAME		
STREET ADDRESS	11353 S.W. 69 CT.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1,4 CITY-ST-ZIP		
TITLE	PD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BUGDAL, GEORGIANNE		2.2 NAME		,
STREET ADDRESS	11353 S.W. 69 CT.		2.3 STREET ADDRESS	i	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE	VP	DELETE	3.1 TITLE		Change Addition
NAME	SPENCER, MARGARITA A.		3.2 NAME		ĺ
STREET ADDRESS	929-l Hamilton Dr.		3.3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL		3.4. CITY-ST-ZIP	<u>.</u>	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
Street address			4.3 STREET ADDRESS		
City - St - ZIP			4.4 CITY - ST - ZIP		ا ــــــــــــــــــــــــــــــــــــ
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP		1 Ab 2 290 - 1 - 200 -	6.4 CITY - ST - ZIP	0	ALE AL TAIL OF THE PARTY OF THE
indicated	permy that the information supplied with on this annual report or supplemental	n uns ming does not quality t annual report is true and acc	or the exemption stated in curate and that my signatt	Section 119.07(3)(i), Florida Statutes. I further cure shall have the same legal effect as if made un	ermy that the information   ider oath; that I am an

14. I 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 annual report or suppliemental 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 op an attachment with an address.

SIGNATURE:

History 1.

15.98