

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90138 028 ***150.00

DOCUMENT # 838966



1. Entity Name
THE B G SERVICE COMPANY, INC.

Principal Place of Business
**1400 ALABAMA AVE
P.O. BOX 2259
WEST PALM BEACH FL 33402**

Mailing Address
**1400 ALABAMA AVE
P.O. BOX 2259
WEST PALM BEACH FL 33402**

60000011



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

4. FEI Number **22-1734357**
Applied For
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FROST, EDWIN L.
THE PIONEER COMPLEX, UNIT NO. 15
1400 ALABAMA AVE.
WEST PALM BCH FL 33402**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	FROST, EDWIN L.	
STREET ADDRESS	1660 SOUTH AIA, # 152	
CITY-ST-ZIP	JUPITER FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	FROST, JOHN H.	
STREET ADDRESS	2811 BANYAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FROST, MARJORIE W.	
STREET ADDRESS	1660 S AIA #152	
CITY-ST-ZIP	JUPITER FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	FROST, MARY E.	
STREET ADDRESS	2811 BANYAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN L. FROST **SIGNATURE REQUIRED** 1/10/03 561 659 1471
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #

CFR2E034 (10/02)