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

(9)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

SIGNATURE:

DOCUMENT # F 52024) 1. Corporation Name

FILED Jul 13, 1999 8:00 am Secretary of State 07-13-1999 90012 043 ***550.00

6/30/99 (904)253-1560

Daytime Phone #

В&Г	CONCEPTS, INC.						•		
0: 1.0	Me Me	ulling Address							-
D . 000									
125 South Palmetto Ave. Post Office Box 15048					1 =				
Daytona Beach, FL 32114 Daytona Beach, Fl				FL 32115		DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						11/02/1981			plied For
2. Principal Pl	lace of Business 2a.	Mailing Address			1	4. FEI Number 59-2124913		<u> </u>	plied For t Applicable
21	26					33-2124313		\$8.75 A	
Suite, Apt. :		Suite, Apt. #, etc.			1	5. Certificate of Status Desired-	□	Fee Re	
22	27	City & State				6. Flastias Campaign Financias		\$5.00	<u></u>
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		Added to	•
23 Zin	Country 28	Zip	Country	,		8. This corporation owes the curr	ent vear Inta		
Zip	25 29 30			'		Personal Property Tax.	one your me		□No
9. Name and Address of Current Registered Agent			'' 			10. Name and Address of New I	Registered A	igent	
	5. Name and Address of Current Regist	terou Agoin	81	N	lame				
CT (Corporation System			<u> </u>	N	/D.O. D. N. mharia Not Assent	abla)		
1200 South Pine Island Road				82 Street Address (P.O. Box Number is Not Acceptable)					
Plantation, Florida 33324				83					
	•		L	_					
			84	1	City		FL	85 Zip C	
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	<u> </u>				****		DATE		
	Signature, typed or printed name of registered agent and title if		gistered Ager	nt sign	nature required wi	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
12.	OFFICERS AND DIRE	DELETE	1,1 TITLE			ADDITIONO, OTTO TO OT	1102.101	Change	Addition
TITLE	<u> </u>		1.2 NAME						
NAME	opendich, radi N.		1.3 STREE	TADE	noese				
STREET ADDRESS	220 200-01				ŧ				
CITY-ST-ZIP	Contract		1.4 CITY-S 2.1 TITLE	o I • Zar			٠	Change	Addition
TITLE			2.2 NAME						
NAME	Saccon, Harry				nocee				
STREET ADDRESS	14620 N. Nebraska Ave.,	Blag.B,Ste.10	2.3 STREE 2.4 CITY-S						
CITY-ST-ZIP	Tampa, Th		3.1 TITLE	31-ZI				Change	Addition
TITLE	5								
NAME	Tillotson, Margo M.		3.3 STREE	TADE	npess		•		
STREET ADDRESS	125 South Palmetto Aven		3.4. CITY-5						
CITY-ST-ZIP	Day cona Meden, TH OZIIT		4.1 TITLE		ir			☐ Change	☐ Addition
TITLE	D		4. 2 NAME						
NAME	Ogle, Bill C. 125 South Palmetto Aven	110	4.3 STREE		DRESS				
STREET ADDRESS			4.4 CITY-5						
CITY-ST-ZIP	Daytona Beach, FL 32114	☐ DELETE	5.1 TITLE) (- L				Change	Addition
TITLE		42	5.2 NAME						'
NAME	•	٠,	5.3 STREE	TADO	DRES\$				
STREET ADDRESS	•		5,4 CITY-\$	ST-ZIF	P				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			62 NAME			•			
	l		6.3 STREE	TADE	DRESS				
STREET ADDRESS		/ A	6.4 CITY-\$						
CITY-ST-ZIP	ertify that the information supplied with this fir	ing does not qualify for th	s sysmat	tion	stated in Sec	tion 119.07(3)(i), Florida Statutes.	I further cert	ify that the ir	nformation
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 of the receiver or frustee 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, with all other like empowered.									

Paul N. Upchurch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR