1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F65833**

1. Corporation Name

B & H INDUSTRIES OF SOUTHWEST FLORIDA, INC.

Principal Place of Business 5845 CORPORATION CIR. FORT MYERS FL 33905 US		Mailing Address 5845 CORPORATION CIR FORT MYERS FL 33905 US			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 02/03/1982			
Principal Place of Business 21		2a. Mailing Address				4. FEI Number 59-2180969	} 	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5 Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country Zip Country 25 29 30					This corporation owes the current yes Personal Property Tax.	ear Intangible	□No _	
	9. Name and Address of Current					10. Name and Address of New Regist	ered Agent		
			81	Name					
	VIS, BRUCE A. HIGHLAND PINE CIR	82 Street Ad		Address	(P.O. Box Number is Not Acceptable)				
FORT MYERS FL 33912									
			84	' 					
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auth	ionzed by	tne corpo	corpora pration's	ation submits this statement for the purposes board of directors. I hereby accept the	se of changing if appointment as i	registered	
SIGNATURE		- and title if analyzable /NOTE: Be	raistered Agen	d sonature re	enuired w	nen reinstating) DA	ATE		
12,	Signature, typed or printed name of registered agent and title if applicable (NOTE: Regi			n arginatara ro	54000 M	ADDITIONS/CHANGES TO OFFICER		FORS IN 12	
TITLE	CEO	FICERS AND DIRECTORS 13.			Pro	esident a CEO	Change		
NAME	HOOVIS, BRUCE A		1.2 NAME	ĺ		ruce A. Hoovis,		\	
STREET ADDRESS	6743 HIGHLAND PINE CIR		1.3 STREET	ADDRESS	9	341 Arborfield C	} .	ļ	
CITY-ST-ZIP	FT MYERS FL		1.4 CITY-S	ĺ	Ç	A Myens, FL	32912		
TITLE	ST	☐ DELETE	2.1 TITLE			1 2 7 7	Change	e Addition	
NAME .	TERRY MATTHEWS		2.2 NAME]				ì	
STREET ADDRESS	5235-10 RED CEDAR DR		2.3 STREE					ĺ	
CITY-ST-ZIP	FORT MYERS FL 33907		2 4 CITY-S	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE				☐ Change	e	
NAME (,	3.2 NAME	1					
STREET ADDRESS	335		3.3 STREET	ADDRESS					
CITY-ST-ZIP	3.4.		3.4. CITY- S	T- ZIP	L				
TITLE		☐ DELETE	4.1 TITLE				Change	e Addition	
NAME			4. 2 NAME					Į	
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY-S	T-ZIP					
πιε		☐ DELETE	5.1 TITLE	-			Change	e 🗌 Addition	
NAME			5,2 NAME	ļ				ļ	
STREET ADDRESS		İ	53 STREET	i					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					
TITLE	DELETI		6.1 TITLE				Change	e Addition	
NAME			6.2 NAME	İ	1			1	

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 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 changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED May 15, 1999 8:00 am Secretary of State

05-15-1999 90018 043 ***150.00