SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (9) **DOCUMENT #** F87801 BOB, INC. Maling Address Principal Place of Business 6407 W OAKLAND PARK BLVD 6407 W OAKLAND PARK BLVD 225 N.W. 21 COURT 225 N.W. 21 COURT 3a. Date of Last Report LAUDERHILL F 33313 3. Date Incorporated or Qualified LAUDERHIL FL 33313 US 06/20/1995 06/23/1982 Applied For 4. FEI Number Mailing Address 2. Principal Place of Business 2a. Not Applicable 59-2200870 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite Apt #, etc Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tay Ander s. 199 032 Country Zip Country Zip Yes 🔽 No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MAURICE, ROBERT Street Address (P.O. Box Number is Not Acceptable) 6407 W OAKLAND PARK BLVD LAUDERHILL FL 33313 83 Zip Code 85 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. DAD SIGNATURE (NOTE Regulated Agest signature required when remaining) Separate type composed came of registers diagent and the diappin acti-(96/E)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. RoilsbbA Char on DELETE 1101.6 TITLE CR2E034 COURCHENE, FRANCINE 1.2 NAME NAME 1.3 STREET ADDRESS 6407 W OAKLAND PARK BLVD STREET ADDRESS 1.4 CHY - ST - ZIP LAUDERHILL DF Change ____ Addition CITY ST-ZIP DELETE 2.1 TITLE TITLE 22 NAME MAURICE, ROBERT NAME 6407 W OAKLAND PARK BLVD 2 3 STREET ADDRESS STREET ADORESS LAUDERHILL FL 2 4 CITY - ST - ZIF CITY-ST-ZIP Change Addition DELETE 3.1 T:JLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY - ST - ZIE Change Addition DELETE 4 1 TITLE HILE 4.2 NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY - ST-ZIP Change Addition CITY - \$1 - ZIP DELETE 5 1 THEE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 City - St - ZiP CITY - ST - ZIP Change [_] Addition DELETE € 1 THLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHY-SE-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 it at I am an odin or hydrecter of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes and that my name appears in Blook of or procedular changed, or on an attachment with an address

ASST SECL

SIGNATURE: