

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F93000003355 (5)**

1. Corporation Name

B & C WHOLESALE, INC.

Principal Place of Business

18528 ROBINSON AVE
PT CHARLOTTE FL 33948
US

Mailing Address

PO BOX 3042
PT CHARLOTTE FL 33949
US

2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

22 City & State

23
City & State

27 City & State

28
City & State

24 Zip

25
Zip

29 Zip

30
Zip

Country

31
Country

Country

32
Country

9. Name and Address of Current Registered Agent

**PUKAL, WILLIAM
18528 ROBINSON AVE
PT CHARLOTTE FL 33948**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPP	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUKAL, WILLIAM		1.2 NAME
STREET ADDRESS	18528 ROBINSON AVE		1.3 STREET ADDRESS
CITY-ST-ZIP	PT CHARLOTTE FL		1.4 CITY-ST-ZIP
TITLE	VCO	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUKAL, DANIEL		2.2 NAME
STREET ADDRESS	11317 GEORGIA AVE., NO		2.3 STREET ADDRESS
CITY-ST-ZIP	CHAMPLIN MN 55316		2.4 CITY-ST-ZIP
TITLE	V	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUKAL, CHARLETTE		3.2 NAME
STREET ADDRESS	4549 THOMAS AVE., NO.		3.3 STREET ADDRESS
CITY-ST-ZIP	MINNEAPOLIS MN 55412		3.4 CITY-ST-ZIP
TITLE	SD	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUKAL, DAN		4.2 NAME
STREET ADDRESS	11317 GEORGIA AVE., NO.		4.3 STREET ADDRESS
CITY-ST-ZIP	CHAMPLIN MN 55316		4.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	500002590555 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			-07/16/98--01048--005
STREET ADDRESS			***150.00
CITY-ST-ZIP			

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.

SIGNATURE

CR2E034 (5/98)

FILED
Jul 16 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1993

4. FEI Number

41-161004

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent

7/16/98

Play 2

TO WHOM IT MAY CONCERN:

WE RECEIVED THE COPY OF THE 1998 PROFIT CORP. ANNUAL REPORT PACKET MARKED 2ND NOTICE.

ON 7-7-98 WE CALLED YOUR OFFICE & SPOKE TO "JO" AND INDICATEED THAT WE HAD NEVER RECEIVED THE FIRST COPY, WHICH WAS EVIDENTALLY SENT IN JAN.

IF YOU WOULD PLEASE CHECK THE PAST HISTORY - WE HAVE NEVER BEEN LATE IN FILING THIS REPORT.

ENCLOSED YOU WILL FIND THE ORIGINAL FILING FEE.

IF THERE IS ANY PROBLEM, PLEASE ADVISE.

THANK YOU



WILLIAM PUKAL

(941) 624-6896