## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

F9400005218 (2) DOCUMENT #
1. Corporation Name

B.P. CONSULTING, INC.



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Principal Place of Business Mailing Address								
6441 BALTUSI		6441 BALTUSROL TE	RR					
STUART FL 34	1997	STUART FL 34997 US						
US		US			<ol> <li>Date Incorporated or Qualified 10/07/1994</li> </ol>		f Last Report 11/1995	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FLI Number		Applied For	ır
21		26			38-3080835		Not Applica	able
Suite, Apt. #.	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	al
City & State		City & State	22.00 12		6. Election Campaign Financing		\$5.00 May Be	<b>;</b>
23		28			Trust Fund Contribution		Added to Fees	
Zip	Country	Zφ	Cou	intry	8. This corporation has liability for		unders 199.032,	ļ
24	25	29	30	1		s XNo		
	9. Name and Address of Current	t Registered Agent		O1 None	10. Name and Address of New I	negistered At	Jen	
				81 Name				
PACE, B				82 Street A	ddress (P.O. Box Number is Not Accepta	ble)		
	LTUSROL TERRACE							
STUART	FL 34997			83				
				84 City		FL	85 Zip Code	
or registere familiar with	d agent, or both, in the State of Florid n, and accept the obligations of Section Date of Section (Section of Section of Sec	on EU7.0505, Florida Statute	es.		poration submits this statement for the pulpoard of directors. I hereby accept the applicated when reinstaling)	28/90 DATE	4	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	~ · · · · · · · · · · · · · · · · · · ·		
TITLE	PCST	DELETE:	1.11	TITLE			Change 🔲 Addit	ition
NAME	PACE, BARBARA		1.2 N	AME				
STREET ADDRESS	6441 BALTUSROL TERRACE		1.3 S	TREET ADDRESS				
CITY-ST-ZIP	STUART FL 34997		140	11Y-S1-ZIP				
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NAME	NOWIKOWSKI, ROBERT		231	IAME				
STREET ADDRESS	6441 BALTUSROL TERRACE		2.3 S	TREET ADDRESS				
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14. I do hereb	y certify that the information supplied w	with this filing is voluntarily fu	urnished and	r does not qual	lify for the exemption stated in Section 11 curate and that my signature shall have the	ອ.ບ7(૩)(K), Flôt ne same legal ຄ	ioa Statutes. I furtri effect as if made un	nder 

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 in 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 attractment with an address.