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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F95000004617 (5)

**BSL SERVICE INC** 

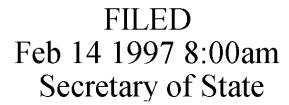
Principal Place of Business

Mailing Address

100 SE 2ND ST 32ND FLOOR MIAMI FL 33131

SIGNATURE:

100 SE 2ND ST 32ND FLOOR MIAMI FL 33131-2100





3. Date Incorporated or Qualified 3a. Date of Last Report

01-13-97

305-579-8000

						2/1996	
2. Principal P	lace of Business 3 Fisher Island Drive	28. Mailing Address 26. 5303 h5hu	Talm	d Dave	4. FEI Number 22-3204241		Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.	JOW	ICI PITAL		- \$8:	75 Additional
22		27			5. Certificate of Status Desired	<b>+</b>	e Required
City & State	6. T. 1. C.	City & State	٠	. b	6. Election Campaign Financing	\$5.	.00 May Be
23 F15h	icr Island, FL	28 Fisher Isla	nd. E	bada	Trust Fund Contribution		ded to Fees
7ip 3310	Country	Zip	Count	ry	8. This corporation has liability fo	r intangible tax und	ler s. 199.032,
24 3310	•  ~~	29 33109	30		Florida Statutes	Yes No	
	9, Name and Address of Current	Registered Agent	<del></del>	10, Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
			8	3			
		•	8	4 City		85	Zip Code
		1007 1000 = 1		1		FL I	·
11. Pursuant office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statute f Florida. Such change was a	es, the abo authorized l	ve-named corporation	oration submits this statement for the on's board of directors. I hereby acc	purpose of changi- ept the appointmen	ng its registered
agent La	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	orida Statut	es.	· · · · · · · · · · · · · · · · · · ·		1 22 1 23/310103
SIGNATURE	Styrial inelityphotox printed harne of regulation diagent	and title if applicable. (NOT)	E Hagislered A	gent signature require	ed when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIREC	TORS IN 12
TITLE	DCP	☐ DELETE	1,1 TITLE			Char	nge 🔲 Addition
NAME	LEBOW, BENNETT S		1.2 NAM	E			
STREET ADDRESS	100 SE 2ND ST 32ND FLOOR		1.3 STRE	ET ADDRESS			
CITY-ST-7IP	MIAMI FL 33131		1.4 CITY	- ST- ZIP			
TITLE	VI	DELETE	2.1 TITLE			☐ Char	nge Addition
NAME	SAUTER, GERALD E		2.2 NAM	E			
STREET ADDRESS	100 SE 2ND ST 32ND FLOOR		23STRE	ET ADDRESS			
CITY-ST-7IP	MIAMI FL 33131		2 4 CITY	- ST- ZIP			
TITLE	5	L DELETE	3.1 TITLE			Char	nge 🔲 Addition
NAME	BELL, MARC N		3.2 NAM	Ε			
STREET ADDRESS	100 SE 2ND ST 32ND FLOOR		3.3 STRE	ET ADDRESS			
CITY - ST - ZIP	MIAMI FL 33131		3.4. CITY	-ST-ZIP			
TITLE	\$	DELETE	4.1 TITLE			☐ Char	nge 🔲 Addition
NAME	BALOG, ANDREW E		4 2 NAM	E			
STREET ADDRESS	100 SE 2ND ST 32ND FLOOR		4 3 STRE	ET ADDRESS			
CITY - ST - 71P	MIAMI FL 33131		4.4 CiTY-				
TITLE		[] DELETE	51 TATLE			Char	nge 🗌 Addition
NAME			5.2 NAM	:	•		į
STREET ADDRESS			5 3 STRE	et address			İ
CITY-ST-ZIP		····	5.4 CITY	ST-ZIP			
TITLE		☐ DELETE	61 TITLE		** ·	☐ Chan	nge Addition
NAME			62 NAME	:			
STREET ADDRESS			6.3 STRE	et address	• •		
CITY-S1-7/P			6.4 CITY	ST - ZiP			
14. I do hereb informatio	by certify that the information supplied in in indicated on this annual report of sup freer or director of the corporation or the	with this filing does not qualify applemental annual report is tr	y for the ex- rue and acc	emption stated curate and that	in Section 119.07(3)(i), Florida Statut my signature shall have the same leg	es. I further certify to all effect as if made	hat the under oath; that