

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1997 8:00am
Secretary of State

DOCUMENT # F96000000188 (0)

1. Corporation Name
B.C.M.C., INC.

Principal Place of Business
PO BOX 3285
HALLANDALE FL 33008-3285

Mailing Address
PO BOX 3285
HALLANDALE FL 33008-3285



2. Principal Place of Business

21 Suite Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite Apt. #, etc.

27 City & State

28 Zip Country

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30

3. Date Incorporated or Qualified

01/10/1996

3a. Date of Last Report

4. FEI Number

65-0608852

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BASS, MARILYN
2851 NE 183 ST
NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

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

TITLE P BASS, MARILYN DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
2851 N.E. 183 ST.
NORTH MIAMI BEACH FL 33180

TITLE S BASS, LEWIS DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
2851 N.E. 183 ST.
NORTH MIAMI BEACH FL 33180

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP Change Addition

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP Change Addition

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marilyn Bass

Date

Daytime Phone #

305-932-4603

CR2E034 (9/96)