PROFIT CORPORATION ANNUAL REPORT <b>1998</b>	E AFTER	Secre Secre	ARTMENT OF STATE B. Mortham bitary of State F CORPORATIONS	FILED Apr 15 1998 8:00am Secretary of State		
Corporation Name B.C.M.C., INC.	00000	00188 ((	<b>)</b>			
rincipal Place of Business PO BOX 3285 HALLANDALE FL 33008-3285	F	iling Address PO BOX 3285 HALLANDALE FL 330	008-3285		E IN THIS SPACE	IF FØIÐI TOLF KONS
				3. Date Incorporated or Qualified		
Principal Place of Business	28.	Mailing Address		01/10/1996 4. FEI Number		Applied For
Suite, Apt #, etc.	26	Suite, Apt. #, etc.		65-0608852	0 7E	Not Applicable Additional
	27			6. Certificate of Status Desired		Pequired
City & State	28	City & State		<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		D May Be to Fees
Zip Country		Zip	Country	8. This corporation owes or has pa	aid the current year I	ntangible
25 9. Name and Address of C	29 Surrent Registe	ered Agent	30	Personal Property Tax due June 10. Name and Address of New Re		
2851 NE 183 ST NORTH MIAMI BEACH FL 33	160		82 Street Add 83 84 City	Iress (P.O. Box Number is Not Acceptat	· · · · · · · · · · · · · · · · · · ·	o Code
NORTH MIAMI BEACH FL 33 Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with, and accept the GNATURE	7.0502 and 60 State of Florida obligations of,		83 84 City tutes, the above-named corr s authorized by the corpora Florida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	FL 85 Zip purpose of changing pt the appointment a	
NORTH MIAMI BEACH FL 33 Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with, and accept the GNATURE Signature, typed or printed name of register OFFICER:	7.0502 and 60 State of Florida obligations of,	applicable (N TORS	83 84 City tutes, the above-named corp s authorized by the corpora Florida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	FL 85 Zip purpose of changing pt the appointment a DATE DERS AND DIRECTO	Its registered s registered
NORTH MIAMI BEACH FL 33	7.0502 and 60 State of Florida obligations of, red agont and talle it S AND DIREC	appicable (N	83     84 City     85     84 City     1010     1010     1010     1010     1010     1010     1010     1010     1010     1010     1010     1010     1010     1000	poration submits this statement for the p tion's board of directors. I hereby accep	FL 85 Zip purpose of changing pt the appointment a	its registered s registered
NORTH MIAMI BEACH FL 33	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160	applicable (N TORS	B3     B4 City     Lutes, the above-named corp     s authorized by the corpora     Florida Statutes.     OTE Registered Agent signature requ     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-SI-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS	poration submits this statement for the p tion's board of directors. I hereby accep	FL 85 Zip purpose of changing pt the appointment a DATE DERS AND DIRECTO	its registered s registered
NORTH MIAMI BEACH FL 33           Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent, arm familiar with, and accept the or GNATURE           Signature, typed or printed name of registered agent, arm familiar with, and accept the or OFFICER:           BASS, MARILYN           REET ADDRESS           Y-ST-ZIP           NORTH MIAMI BEACH           LE           BASS, MARILYN           2851 N.E. 183 ST.           NORTH MIAMI BEACH           LE           S           NATH MIAMI BEACH           LE           S           AGET ADDRESS           2851 N.E. 183 ST.           NORTH MIAMI BEACH           XY-ST-ZIP           NORTH MIAMI BEACH	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160	eppiceble (N TORS DELETE	B3     B4 City     Lutes, the above-named corp     s authorized by the corpora     Florida Statutes.     OTE Registered Apent signature requ     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-SI-2IP     2.1 TITLE     2.2 NAME	poration submits this statement for the p tion's board of directors. I hereby accep	FL     85     Zip       purpose of changing pt the appointment a       DATE       DERS AND DIRECTO       Change	its registered s registered
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NORTH MIAMI BEACH FL 33          Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent, arm familiar with, and accept the office agent, arm familiar with,	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160		B3     B4 City     Uutes, the above-named corp     s authorized by the corpora     Florida Statutes.     OTE Registered Agent signature requ     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-SI-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-SI-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS	poration submits this statement for the p tion's board of directors. I hereby accep	FL     85     Zip       purpose of changing pointment a     Date       DATE     Change       CERS AND DIRECTO     Change       Change     Change	its registered s registered VRS IN 12 Addition
NORTH MIAMI BEACH FL 33           Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent, arm familiar with, and accept the orgeneration of the section of the sectin of the section of the section	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160		83       84       City       tutes, the above-named corporation of the corporation of the corporation of the corporation of the statutes.       OTE       13.       1.1       1.1       1.2       1.3       1.4       1.3       1.4       1.3       2.1       2.1       2.1       2.1       2.1       2.3       3.4       2.3       3.3       3.3       3.4       CITY-SI-ZIP       3.4       3.4       4.1       TITLE	poration submits this statement for the p tion's board of directors. I hereby accep	FL     85     Zip       purpose of changing pointment a     Date       DATE     Change       CERS AND DIRECTO     Change       Change     Change	its registered s registered
NORTH MIAMI BEACH FL 33           Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent, arm familiar with, and accept the or GNATURE           Signature, typed or printed name of registered agent, arm familiar with, and accept the or OFFICER:           BASS, MARILYN           LE           P           ME           BASS, MARILYN           2851 N.E. 183 ST.           NORTH MIAMI BEACH           LE           S           ME           BASS, LEWIS           2851 N.E. 183 ST.           NORTH MIAMI BEACH           LE           S           ME           BASS, LEWIS           2851 N.E. 183 ST.           NORTH MIAMI BEACH           LE           ME           HET ADDRESS           Y-ST-ZIP           NORTH MIAMI BEACH           LE           ME           HET ADDRESS           Y-ST-ZIP           LE           ME           HET ADDRESS           Y-ST-ZIP           LE           ME           HET ADDRESS           Y-ST-ZIP           LE           ME           ME <td>7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160</td> <td></td> <td>B3     B4     City     tutes, the above-named corp     s authorized by the corpora     Florida Statutes.     OTE Registered Agent signature requ     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP</td> <td>poration submits this statement for the p tion's board of directors. I hereby accep</td> <td>FL     85     Zip       purpose of changing pointment a     Zip       DATE     Change       CERS AND DIRECTO     Change       Change     Change       Change     Change</td> <td>its registered s registered</td>	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160		B3     B4     City     tutes, the above-named corp     s authorized by the corpora     Florida Statutes.     OTE Registered Agent signature requ     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP	poration submits this statement for the p tion's board of directors. I hereby accep	FL     85     Zip       purpose of changing pointment a     Zip       DATE     Change       CERS AND DIRECTO     Change       Change     Change       Change     Change	its registered s registered
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NORTH MIAMI BEACH FL 33	7.0502 and 60 State of Florida obligations of, red agent and tille if S AND DIREC FL 33160		83       84       City       tutes, the above-named corporation is authorized by the corporation of the statutes.       Intervention of the sta	poration submits this statement for the p tion's board of directors. I hereby accep	FL     85     Zip       purpose of changing pointment a     Zip       DATE     Change       CERS AND DIRECTO     Change       Change     Change       Change     Change	its registered s registered

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