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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 ×

DOCUMENT # F97000004503 °C

BG/RDI ACQUISITION CORPORATION

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90119 043 ***150.00

					Ì				
Principal Place of Business Mailing Address									
4960 B	e Lake 1	Drive	:						
Boca Ra	on, FL	33431		DO NOT WRI	TE IN THIS	SPACE			
						3. Date Incorporated or Qualifed 08/26/97			
2. Principal P	lace of Business	2a. Mailing Addres	s			4. FEI Number	_	<i>F</i>	Applied For
21		26				65-0776572			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	tc.			5. Certifcate of Status Desired			Additional
22		27				5. Certificate of Otation Desired		Fee F	Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country Zip			Country		8. This corporation owes the curr	ent year Int	angible ☑Yes	□No
24	25	29	[30]			Personal Property Tax. 10. Name and Address of New R	Pagistared		
	9. Name and Address of Current	Registered Agent		81 Nam		To. Name and Address of New P	redistered.	-gent	
				, , , , ,					
CORPORATION SERVICE COMPANY 1201 HAYS STREET				82 Stree	et Addres	s (P.O. Box Number is Not Accepta	ible)		[
TALLAHASSEE FL 32301-2525				83		· · · · · · · · · · · · · · · · · · ·			
				84 City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida	Statutes, the at	ove-name	d corpor	ation submits this statement for the	numose of	changing if	is registered
office or r agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change ons of, Section 607.05	i was authorized 05, Florida Statu	by the col ites.	rporation	s board of directors, I hereby accel	ot the appoi	milent as i	egistered
SIGNATURE									
GIGHTORE	(NOTE: Registered	Agent signatur	re required w		DATE	- DIDEOT	1000 IN 40		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN	Change	
TITLE	PSD	☐ DELI	•					□ Change	Addition
NAME	Rondeau, Patrick		1.2 NA		_				
STREET ADDRESS	4960 Blue Lake Dr		H	REET ADDRES	ss				1
CITY-ST-ZiP	Boca Raton, FL 33	.431 □ DELI		TY-ST-ZIP				Change	Addition
TITLE	T	C) DEC	ı ı		İ				
NAME	Chiste, John F.	1110	2.2 NA		<u>.</u> [
STREET ADDRESS	4960 Blue Lake Dr Boca Raton, FL 33		i i	REET ADDRES	**				
CITY-ST-ZIP	<u> </u>	□ DEU		TY-ST-ZIP	+			Change	Addition
TITLE NAME	VD Gray, L. Nicolas		3.2 NA						_
STREET ADDRESS	4960 Blue Lake Dr	ive	H	REET ADDRES	ss				Ì
	Boca Raton, FL 33	431		TY-ST-ZIP					
CITY-ST-ZIP TITLE	D	DELI			+-			☐ Change	Addition
NAME	Ferguson, Danny I		4.2 N	WE					. [
	4960 Blue Lake Dr	ive	43 ST	REET ADDRES	ss				
CITY-ST-ZIP	Boca Raton, FL 33			Y-ST-ZIP	Į				
TITLE		☐ DEL						Change	e Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRES	ss				
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP					
TITLE		☐ DELI	ETE 6.1 TIT	LE		<u> </u>		☐ Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET ADDRES	ss				
CITY-ST-ZIP			6.4 CIT	TY-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 of 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 receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an adapting the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an adapting the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive of the corporation
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/27/99

561-912-8006

:R2E034 (11/98)