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 # G18983 1. Corporation Name

B & S INC. OF PALM BEACH COUNTY

Principal Place	e of Business	Mailing Ad	Mailing Address							
1055 FLORENCE			1055 FLORENCE ROAD HYPOLUXO FL 33462							
HYPOLUXO FL		HYPOLUXO					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
					01/17/1983					
Principal Place of Business 2a. Mailing Address							4. FEI Number Applied Fo			
	IGOS OF GUSINESS	26	g . 100,000				59-2249675	<u> </u>	Applicable	
Suite, Apt.	# etc		Apt. #, etc.				_ \$8.	75 A	ditional	
—	#, C.O.	27	7 tp (: 11, oto)				E Contitonto of Status Desired	e Rec		
City & State	e	City &	State				6. Election Campaign Financing 55	00.	/lay Be	
23		28	28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current year Intangible			
24	25	29	[3	30			Personal Property Tax.		□No	
271	9. Name and Address of C		Agent				10. Name and Address of New Registered Agent		- -	
-					81	Name				
H. SCHAFFER & CO.					82 Street Add		dress (P.O. Box Number is Not Acceptable)			
2765 CARDINAL CIRCLE						Judet Mu	Street Address (F.O. Box Number is Not Acceptable)			
GUL	FSTREAM FL 33483				83					
							los l	Zip C	odo	
					84	City	FL 85	Zip C	oue	
11 Pursuant	to the provisions of Sections 60	7.0502 and 607.1508	8. Florida Statutes	s, the al	bove	-named co	rporation submits this statement for the purpose of changing	ng its i	egistered	
office or r	registered agent, or both, in the	State of Florida, Suci	n change was aut	inonzeo	ΙDΥί	ne corpora	tion's board of directors. I hereby accept the appointment	as reg	istered	
agent. I a	im familiar with, and accept the	obligations of, Section	11 BU7.0303, FIOR	ua Statt	Mes.					
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicab	le (NOTE: F	Registered	Agent	signature regu	ired when reinstating) DATE			
12.		RS AND DIRECTORS		13.	-	_ -	ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTO	RS IN 12	
TITLE	P		☐ DELETE	1.1 TIT	πE		☐ Ch	ange	☐ Addition	
NAME	VILLANACCI, SIMON L.			1.2 NA	ME.					
STREET ADDRESS	**** CI DOCUME DOAD			1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	HYPOLUXO FL			1	TY-ST					
TITLE	TITI OLUNO I C		☐ DELETE	2.1 TIT			□ Ch	ange	☐ Addition	
NAME				2.2 NA						
l .						ADDRESS	·			
STREET ADDRESS				2.4 C						
CITY-ST-ZIP			☐ DELETE	3.1 TIT				ange	Addition	
				3.2 N					-	
NAME						ADORESS				
STREET ADDRESS					ITY-ST					
CITY-ST-ZIP			☐ D€LETE	4.1 Ti		1-2IF	□ Ch	ange	Addition	
TITLE				4.2 N				-	_	
NAME				l l		ADDRESS				
STREET ADDRESS										
CITY-ST-ZIP			DELETE	5.1 TI	TY-ST	- ZIP	□ Ch	ange	[Addition	
TITLE			m nereje	5.1 II 5.2 N/			· LJ0//			
NAME						ADDRESS				
STREET ADDRESS										
CITY-ST-ZIP			☐ DELETE	5.4 CI 6.1 TI	TY-ST	- ZIP	∏ Ch		☐ Addition	
							LICE			

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 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 encowered 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, with an other like empowered.

6.2 NAME

3.81REET ADDRESS

6.4 CPTY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90061 009 ***150.00